Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main

Document Page 1 of 60

| Fill in this information to identify your case: | | |
|---|---|--------------------------------------|
| United States Bankruptcy Court for the : | | |
| NORTHERN District of ILLINOIS (State) | | |
| Case Number (If known): | Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13 | ☐ Check if this is an amended filing |

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together-called a joint case-and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | rt 1: Identify Yourself | | |
|----|---|----------------------------|---|
| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
| 1. | Your full name | | |
| | Write the name that is on your government-issued picture identification (for example, | Roberta First name Leedora | First name |
| | your driver's license or passport). | Middle name | Middle name |
| | Bring your picture | Allen | |
| | identification to your meeting with the trustee. | Last name | Last name |
| | with the dustee. | Suffix (Sr., Jr., II, III) | Suffix (Sr., Jr., II, III) |
| 2. | All other names you | | |
| | have used in the last 8 years | First name | First name |
| | Include your married or maiden names. | Middle name | Middle name |
| | | Last name | Last name |
| | | First name | First name |
| | | Middle name | Middle name |
| | | Last name | Last name |
| 3. | Only the last 4 digits of your Social Security | xxx - xx - <u>6639</u> | XXX - XX |
| | number or federal Individual Taxpayer Identification number | OR | OR |
| | identification number | 9xx - xx | 9xx - xx |

Entered 12/06/16 17:45:22 Desc Main Filed 12/06/16 Case 16-38543 Doc 1 Page 2 of 60

Document Roberta Leedora Debtor 1 Case Number (if known) _

| | | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): |
|---|---|---|---|
| 4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years | | I have not used any business names or EINs. | I have not used any business names or EINs. Business name |
| | Include trade names and doing business as names | Business name | Business name |
| | | EIN | EIN |
| | | EIN | EIN |
| 5. | Where you live | | If Debtor 2 lives at a different address: |
| | | 4957 W. Washington Number Street Unit 1 | Number Street |
| | | Chicago IL 60644 City State ZIP Code | City State ZIP Code |
| | | COOK | County |
| | | If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address. | If Debtor 2's mailing address is different from the one above, fill it in here. Note that the court will send any notices this mailing address. |
| | | Number Street | Number Street |
| | | P.O. Box | P.O. Box |
| | | City State ZIP Code | City State ZIP Code |
| 6. | Why you are choosing | Check one: | Check one: |
| | this district to file for bankruptcy. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. | Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. |
| | | have another reason. Explain. (See 28 U.S.C. § 1408 | I have another reason. Explain. (See 28 U.S.C. § 1408 |
| | | | |
| | | | |
| | | | |

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main

Document

Page 3 of 60

Roberta Leedora Debtor 1 Case Number (if known) Last Name Part 2: **Tell the Court About Your Bankruptcy Case** Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals The chapter of the Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box. Bankruptcy Code you are choosing to file Chapter 7 under ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for ☐ No bankruptcy within the _{District} IInbke When ____04/29/2016 Case Number _____16-14701 last 8 years? Yes. District None __ When ___ __ Case Number ___ MM / DD / YYYY MM / DD / YYYY No 10. Are any bankruptcy cases pending or being filed by a spouse who is Yes. not filing this case with _____ When ____ Case Number, if known _____ you, or by a business MM / DD / YYYY parter, or by affiliate? Relationship to you _ When _ Case Number, if known ____ District MM / DD / YYYY 11. Do you rent your ☐ No. Go to line 12 residence? Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main

Debtor 1 Roberta Leedora Document Allen Page 4 of 60

Case Number (if known)

| Name of business, if any Name of business, | Are you a sole proprietor of any full- or part-time business? A sole proprietorship is a | ■ No. □ Yes. | Go to Part 4. Name and location of | business | | | | |
|--|---|-----------------|--|----------------------------|----------------------|---------------|------|--|
| Number Street Number N | business you operate as an individual, and is not a separate legal entity such as | | Name of business, if any | lame of business, if any | | | | |
| Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(69)) None of the above None of the above None of the above | LLC. If you have more than one sole proprietorship, use a separate sheed and attach it | | Number Street | | | | | |
| Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(61B)) Stockbroker (as defined in 11 U.S.C. § 101(63A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) Nane of the above If you are filling under Chapter 11, the court must know whether you are a small business debtor, you must attach your most rebalances beset, statement of operations, cash-flow statement, and federal income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filling under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. What is the hazard? If immediate attention Yes. What is the hazard? If immediate attention Yes. What is the hazard? If immediate attention Yes. What is the property Number Street Number | | | City | | | State Zip Cod | le | |
| Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(63A)) Commodity Broker (as defined in 11 U.S.C. § 101(69)) None of the above If you are filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor. Yes addition of small business debtor. See 11 U.S.C. § 101(51D). No. I am filing under Chapter 11. In the court must know whether you are a small business debtor, you must attach your most rebalance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am filing under Chapter 11. In the sharkruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. Y | | | Check the appropriate | box to describe your bu | siness: | | | |
| Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above | | | ☐ Health Care Bus | iness (as defined in 11 U | .S.C. § 101(27A)) | | | |
| Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above None of the above None of the above | | | ☐ Single Asset Re | al Estate (as defined in 1 | 1 U.S.C. § 101(51B)) | | | |
| Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor you must attach your most re balance shedy sate befor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. The Bankruptcy Code. Seport If You own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No. What is the hazard? If you are filing under Chapter 11, the court must know whether you are a small business debtor you must attach your most re balance sheet, statement of operations, cash-flow statement, and feeral income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. The Bankruptcy Code. Yes. What is the hazard? If you are filing under Chapter 11, the court must know whether you are a small business debtor some tax return or if any of the documents of the procedure in 11 U.S.C. § 1116(1)(B). No. I am not filing under Chapter 11. No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. What is the hazard? If you are filing under Chapter 11, the court must know whether you are a small business debtor according to that the paparous forms a small business debtor according to the definition in the Bankruptcy Code. No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. What is the hazard? If you are filing under Chapter 11, the court must know whether you are a small business debtor according to the definition in the Bankruptcy Code. No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. If you are filing under Ch | | | ☐ Stockbroker (as | defined in 11 U.S.C. § 10 | 01(53A)) | | | |
| Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor, so mall business debtor, see 11 U.S.C. § 101(51D). If you are filing under Chapter 11, the court must know whether you are a small business debtor, you must attach your most re balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of the documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B). No. 1 am not filing under Chapter 11. No. 1 am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention No. Yes. What is the hazard? If immediate attention is needed, why is it needed? Where is the property? | | | ☐ Commodity Brok | er (as defined in 11 U.S. | C. § 101(6)) | | | |
| Chapter 11 of the Bankruptcy Code and are you a small business debtor? For a definition of small business debtor, see 11 U.S.C. § 101(51D). No. I am not filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. No. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. No. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Yes. What is the hazard? If immediate attention is needed, why is it needed? Where is the property? Number Street | | | ☐ None of the abo | ve | | | | |
| In Do you own or have any property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street | business debtor, see | ☐ No. | am filing under Chapte the Bankruptcy Code. I am filing under Chapte | r 11, but I am NOT a sma | | - | | |
| property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street | Part 4: Report if You Own or Ha | ve Any Hazard | lous Property or Any Pro | perty That Needs Immedia | ate Attention | | | |
| property that poses or is alleged to pose a threat of imminent and indentifiable hazard to public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street | | . | | | | | | |
| public health or safety? Or do you own any property that needs immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street | property that poses or is alleged to pose a threat | _ | What is the hazard? | | | | | |
| If immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs? Where is the property? Number Street | public health or safety? Or do you own any | | | | | | | |
| Where is the property? Number Street | immediate attention? For example, do you own perishable goods, or livestock that must be fed, or a building | | If immediate attention is | s needed, why is it neede | d? | | | |
| Number Street | tnat needs urgent repairs? | | | | | | | |
| Other 700 C | | | Where is the property? | | | | | |
| Ott. 7ID C | | | | | | | | |
| CITY State ZIP C | | | | City | , | State ZIP | Code | |

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main

Debtor 1

Leedora

Document

Page 5 of 60

Roberta

Case Number (if known)

Part 5:

Explain Your Efforts to R

Tell the court whether you have received a briefing about credit counseling.

> The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

| e | eceive a Briefing About Credit Counseling | | | | | | |
|---|--|--|------|--|--|--|--|
| | About Debtor 1: | About Debtor 2 (Spouse Only in a Joint Case): | | | | | |
| | You must check one: | You must check one: | | | | | |
| | I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. | I received a briefing from an approved crediction counseling agency within the 180 days before filed this bankruptcy petition, and I received certificate of completion. | re l | | | | |
| | Attach a copy of the certificate and the payment plan, if any, that you developed with the agency. | Attach a copy of the certificate and the payme plan, if any, that you developed with the agen | | | | | |

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any,

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a le.

| briefing before | you filed for bankruptcy. | | | | | | | |
|---|--|--|--|--|--|--|--|--|
| If the court is sa | atisfied with your reasons, you must | | | | | | | |
| still receive a briefing within 30 days after you fil | | | | | | | | |
| You must file a certificate from the approved | | | | | | | | |
| agency, along | agency, along with a copy of the payment plan you | | | | | | | |
| developed, if a | ny. If you do not do so, your case | | | | | | | |
| may be dismiss | | | | | | | | |
| Anv extension | of the 30-day deadline is granted | | | | | | | |
| • | and is limited to a maximum of 15 | | | | | | | |
| days. | | | | | | | | |
| , | | | | | | | | |
| ີ∏I am not requir | ed to receive a briefing about | | | | | | | |
| | ing because of: | | | | | | | |
| | | | | | | | | |
| Incapacity. | I have a mental illness or a mental | | | | | | | |
| □ ······ | deficiency that makes me | | | | | | | |
| | incapable of realizing or making | | | | | | | |
| | rational decisions about finances. | | | | | | | |
| | rational addictions about initiations. | | | | | | | |
| Disability. | My physical disability causes me | | | | | | | |
| , | to be unable to participate in a | | | | | | | |
| briefing in person, by phone, or | | | | | | | | |
| | through the internet, even after I | | | | | | | |
| | reasonably tried to do so. | | | | | | | |
| | reasonably and to do so. | | | | | | | |
| Active duty | I am currently on active military | | | | | | | |
| | detection of the control of the cont | | | | | | | |

duty in a military combat zone. If you believe you are not required to receive a briefing about credit counseling, you must file a

motion for waiver of credit counseling with the court.

ent ICY. I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion. Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must you file. still receive a briefing within 30 days after approved You must file a certificate from the agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

| I am not required to receive a briefing about |
|---|
| credit counseling because of: |

Incapacity. I have a mental illness or a mental deficiency that makes me incapable of realizing or making

rational decisions about finances. Disability. My physical disability causes me

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main

Debtor 1

Roberta Leedora Document

Page 6 of 60 Case Number (if known)

| | riist Name | Middle Name Last Name | | | | | | |
|-----|---|---|---|--------------------------------|--|--|--|--|
| Pa | Answer These Questions | for Reporting Purposes | | | | | | |
| 16. | What kind of debts do you have? | 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." No. Go to line 16b. Yes. Go to line 17. | | | | | | |
| | | 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. | | | | | | |
| | | No. Go to line 16c. Yes. Go to line 17. | | | | | | |
| | | 16c. State the type of debts you o | owe that are not consumer debts or business | debts. | | | | |
| 17. | Are you filing under Chapter 7? | No. I am not filing under Cl | napter 7. Go to line 18. | | | | | |
| | Do you estimate that after any exempt property is | - | ter 7. Do you estimate that after any exempt es are paid that funds will be available to distr | | | | | |
| | excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors? | Mo. □Yes. | | | | | | |
| 18. | How many creditors do | 1 -49 | 1,000-5,000 | 25,001-50,000 | | | | |
| | you estimate that you | □ 50-99 | 5 ,001-10,000 | 5 0,001-100,000 | | | | |
| | owe? | ☐ 100-199 | 10,001-25,000 | ☐ More than 100,000 | | | | |
| _ | | 200-999 | | | | | | |
| 19. | How much do you | \$0-\$50,000 | ☐ \$1,000,001-\$10 million | \$500,000,001-\$1 billion | | | | |
| | estimate your assets to | \$50,001-\$100,000 | \$10,000,001-\$50 million | □\$1,000,000,001-\$10 billion | | | | |
| | be worth? | \$100,001-\$500,000 | \$50,000,001-\$100 million | \$10,000,000,001-\$50 billion | | | | |
| | | □ \$500,001-\$1 million | □ \$100,000,001-\$500 million | ☐More than \$50 billion | | | | |
| 20. | How much do you | \$0-\$50,000 | □ \$1,000,001-\$10 million | □\$500,000,001-\$1 billion | | | | |
| | estimate your liabilities | \$50,001-\$100,000 | ☐ \$10,000,001-\$50 million | ☐ \$1,000,000,001-\$10 billion | | | | |
| | to be? | \$100,001-\$500,000 | ☐ \$50,000,001-\$100 million | □\$10,000,000,001-\$50 billion | | | | |
| | | ☐ \$500,001-\$1 million | \$100,000,001-\$500 million | ☐ More than \$50 billion | | | | |
| Pa | 17: Sign Below | | | | | | | |
| For | you | I have examined this petition, and correct. | I declare under penalty of perjury that the infe | ormation provided is true and | | | | |
| | | | oter 7, I am aware that I may proceed, if eligib nderstand the relief available under each cha | | | | | |
| | | , , | did not pay or agree to pay someone who is d read the notice required by 11 U.S.C. § 342 | , , | | | | |
| | | I request relief in accordance with | the chapter of title 11, United States Code, s | pecified in this petition. | | | | |
| | | | ment, concealing property, or obtaining mone in fines up to \$250,000, or imprisonment for ud 3571. | | | | | |
| | | /s/ Roberta Leedora A | | ature of Debtor 2 | | | | |
| | | - | | | | | | |
| | | Executed on12/02/2016 | <u>S</u> Exec | uted on | | | | |
| | | MM / DD | / VVVV | MM / DD / VVVV | | | | |

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 7 of 60

| Debtor 1 | Roberta | Leedora | Allen | Case Number (if known) |
|----------|------------|-------------|-----------|---------------------------------------|
| | First Name | Middle Name | Last Name | · · · · · · · · · · · · · · · · · · · |

For your attorney, if you are represented by one

if you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

| 🗶 /s/ David Derrick Lugardo | Date | Date: 12/02 | /2016 |
|----------------------------------|----------|--------------------------|-------------|
| Signature of Attorney for Debtor | Bute | MM / DD / YYY | ſΥ |
| David Derrick Lugardo | | | |
| Printed name | | | |
| Geraci Law L.L.C. | | | |
| Firm name | | | _ |
| 55 E. Monroe St., #3400 | | | |
| Number Street | | | |
| | | | _ |
| Chicago | IL | 60603 | |
| City | State | ZIP Code | |
| | | | |
| Contact Phone 312-332-1800 | Email ad | _{dress} ndil@ge | racilaw.com |
| | | | |
| 6256311 | IL | | |
| Bar number | State | | |
| Bar number | State | | |

| Fill in this in | formation to identi | ify your case: | |
|---------------------------|----------------------|-----------------------------------|------------------|
| Debtor 1 | Roberta | Leedora | Allen |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of | ILLINOIS (State) |
| Case Number (If known) | Γ | | |

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

| Summarize Your Assets | |
|--|-----------------------------------|
| | Your assets Value of what you own |
| Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B | <u> </u> |
| 1b. Copy line 62, Total personal property, from Schedule A/B | \$ 10,859 |
| 1c. Copy line 63, Total of all property on Schedule A/B | \$ 10,859 |
| Summarize Your Liabilities | |
| | Your liabilities Amount you owe |
| Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D | \$8,585 |
| 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F | \$0 |
| 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F | \$74,800 |
| | |
| Summarize Your Liabilities | |
| 4. Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I | \$3,946.93 |
| Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J | \$3,938.00 |

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Page 9 of 60 Document

Roberta Debtor 1 Leedora Case Number (if known) _

First Name Middle Name Last Name **EntriesDescription** <u>AssetsAmount</u> **LiabilitiesAmount Answer These Questions for Administrative and Statistical Records** 6. Are you filing for bankruptcy under Chapter 7, 11 or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. Yes 7. What kind of debt do you have? Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159. Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules. 8. From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official \$3,306.46 Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14. 9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F: Total claim From Part 4 of Schedule E/F, copy the following: \$ 0.00 9a. Domestic support obligations (Copy line 6a.) \$ 0.00 9b. Taxes and certain other debts you owe the government. (Copy line 6b.) $_{0.00}$ 9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.) 9d. Student loans. (Copy line 6f.) \$_3,500.00 9e. Obligations arising out of a separation agreement or divorce that you did not report as \$ 0.00 priority claims. (Copy line 6g.) \$ 0.00

\$ 3,500.00

9g. Total. Add lines 9a through 9f.

9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)

| | | 3 29 E / 2 Doc 1 | | Entered 12/06/16 17:4 | 45:22 De: | sc Main | |
|---------------------------------|-----------------------------------|--|---|---|--------------------|---|---------|
| Fill in this in | formation to ide | ntify your case and this fil | ing: | 0 of 60 | | | |
| Debtor 1 | Roberta | Leedora | Allen | | | | |
| D.H. | First Name | Middle Name | Last Name | | | | |
| Debtor 2 (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United States | Bankruptcy Court fo | or the : <u>NORTHERN</u> Distr | | | | | |
| Case Number | | | (State) | | | Check if this is an | |
| (If known) | | | | | | amended filing | |
| | orm 106A | | | | | | |
| | e A/B: Pr | | | | | | 12/15 |
| ategory where esponsible for | you think it fits supplying corre | best. Be as complete and ct information. If more spa | accurate as possible. If two m ace is needed, attach a separa | fits in more than one category, list the arried people are filing together, both te sheet to this form. On the top of a | th are equally | | |
| | | e number (if known). Ans | • • | | | | |
| | | | Other Real Esate You Own or Ha | | | | |
| No. | n or nave any le | gai or equitable interest in | n any residence, building, land | i, or similar property? | | | |
| Yes. | Describe | | | | | | |
| | _ | - | our entries fro Part 1, includir | ng any entries for pages | > | | \$0.00 |
| | | | | | | | ψ0.00 |
| Part 2: | Describe Your Vel | hicles | | | | | |
| - | | · · · · · · · · · · · · · · · · · · · | | e registered or not? Include any vehic | | | |
| - | | - | | recutory Contracts and Unexpired Lea | ases. | | |
| No. | , trucks, tractors | s, sport utility vehicles, mo | otorcycles | | | | |
| Yes. | Describe | D. # | | | | | |
| N | lake: | Pontiac | Who has an interest in the | | | claims or exemptions. Put ured claims on Schedule D: | |
| N | lodel: | <u>G6</u> | Debtor 1 only Debtor 2 only | | | laims Secured by Property | |
| Υ | ear: | 2006 | Debtor 1 and Debtor 2 on | lv | rrent value of the | | |
| Α | pproximate Milea | age: 100,000 | At least one of the debtors | en en | tire property? | portion you own? | ? |
| O | ther information: | | _ | \$_ | 1 | .00 \$ | 1.00 |
| | | | Check if this is commining instructions) | unity property (see | | | |
| | | | | | | | |
| 04.144 | | A-71/ | | | | | |
| | | | ecreational vehicles, other veh g vessels, snowmobiles, motorcycle | | | | |
| No. | | | | | | | |
| Yes. 5. Add the doll | Describe lar value of the r | oortion vou own for all of v | our entries fro Part 2, includir | ng any entries for pages | | | |
| | | | | | | | \$ 1.00 |
| Part 3: | Describe Your Per | rsonal and Household Items | | | | | |
| | have any logal | or equitable interest in an | y of the following items? | | | Current value of the | |
| Do you own or | nave any legan | or equitable interest in an | y of the following items : | | | portion you own? Do not deduct secured classifications | laims |
| | l goods and furn | = | | | | , p | |
| Examples: | Major appliances, f | urniture, linens, china, kitchenv | vare | | | | |
| Yes. | Describe | | | | | | |
| | | Furniture, linens, small applia | nces, table & chairs, bedroom set | | \$1,000 | \$ 1, ⁱ | 000.00 |

Official Form 106A/B Record # 632668 Schedule A/B: Property Page 1 of 6

Filed 12/06/16 Entered 12/06/16 17:45:22

Document Page 11 of 60 Umber (if known) Roberta Case 16-38543 Doc 1

Middle Name

Desc Main

| | ics | | |
|---|---|---|--|
| | | dios; audio, video, stereo, and digital equipment; computers, printers, scanners; music | |
| Collection | | s including cell phones, cameras, media players, games | |
| Yes | | | |
| 163 | s. Describe | TV, computer, printer, music collection, cell phone \$500 | |
| | | | \$500.00 |
| 08. Collectib | oles of value | | |
| | | ines; paintings, prints, or other artwork; books, pictures, or other art objects; | |
| stamp, c | | collections; other collections, memorabilia, collectibles | |
| | | | |
| ∐ Ye: | s. Describe | | \$ 0.00 |
| 09. Equipme | ent for sports and | hobbies | |
| | | hic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes | |
| | aks; carpentry tools; i | nusical instruments | |
| No. | | | |
| Yes | s. Describe | | |
| 10. Firearms | • | | \$0.00 |
| | | guns, ammunition, and related equipment | |
| No. | | | |
| Yes | s. Describe | | |
| | | | \$0.00 |
| 11. Clothes | | | |
| | | furs, leather coats, designer wear, shoes, accessories | |
| No. | | | |
| Yes | s. Describe | Necessary wearing apparel. \$100 | |
| | | Treestady from gapparer. | \$ 100.00 |
| 12. Jewelry | | | |
| | | costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, | |
| gold, silv | | | |
| ∐ No. | | | |
| Yes | s. Describe | Everyday jewelry, costume jewelry \$150 | |
| | | | \$150.00 |
| 13. Non-farr | | | |
| | es: Dogs, cats, birds, | | |
| No. | | horses | |
| | | horses | |
| Yes | | horses | |
| | s. Describe | | \$ <u>0.0</u> 0 |
| 14. Any othe | s. Describe | ousehold items you did not already list, including any health aids you did not list | \$ |
| | s. Describe | | \$ <u>0.0</u> 0 |
| 14. Any othe | s. Describe | | |
| 14. Any othe | s. Describe | ousehold items you did not already list, including any health aids you did not list | |
| 14. Any other | s. Describe er personal and he s. Describe | ousehold items you did not already list, including any health aids you did not list | 4000 |
| 14. Any other No. Yes | er personal and hose s. Describe dollar value of all | Books, CDs, DVDs & Family Photos \$100 | \$ <u>100.00</u> |
| 14. Any other No. No. Yes | er personal and here s. Describe dollar value of all | Books, CDs, DVDs & Family Photos of your entries from Part 3, including any entries for pages you have attached per here | \$ <u>100.0</u> 0 |
| 14. Any other No. Yes | er personal and hose s. Describe dollar value of all | Books, CDs, DVDs & Family Photos of your entries from Part 3, including any entries for pages you have attached per here | \$ <u>100.0</u> 0 |
| 14. Any other No. Yes | er personal and here s. Describe dollar value of all b. Write that numl | Books, CDs, DVDs & Family Photos of your entries from Part 3, including any entries for pages you have attached per here | \$ 100.00 \$1,850.00 |
| 14. Any other No. Yes | er personal and here s. Describe dollar value of all b. Write that numl | Books, CDs, DVDs & Family Photos of your entries from Part 3, including any entries for pages you have attached per here | \$ 100.00 \$1,850.00 Current value of the portion you own? |
| 14. Any other No. Yes | er personal and here s. Describe dollar value of all b. Write that numl | Books, CDs, DVDs & Family Photos of your entries from Part 3, including any entries for pages you have attached per here | \$ 100.00 \$1,850.00 |
| 14. Any other No. Yes | er personal and here s. Describe dollar value of all b. Write that numl | Books, CDs, DVDs & Family Photos of your entries from Part 3, including any entries for pages you have attached per here | \$ 100.00 \$1,850.00 Current value of the portion you own? Do not deduct secured claims |
| 14. Any other No. Yes 15. Add therefor Part 3 Port 4: Do you own | er personal and heads. S. Describe dollar value of all B. Write that numl Describe Your Finer | Books, CDs, DVDs & Family Photos of your entries from Part 3, including any entries for pages you have attached per here | \$ 100.00 \$1,850.00 Current value of the portion you own? Do not deduct secured claims |
| 14. Any other No. Yes 15. Add therefor Part 3 Port 4: Do you own | er personal and here. S. Describe dollar value of all B. Write that numl Describe Your Fire or have any legal es: Money you have in | Books, CDs, DVDs & Family Photos of your entries from Part 3, including any entries for pages you have attached per here | \$ 100.00 \$1,850.00 Current value of the portion you own? Do not deduct secured claims |
| 14. Any other No. Yes 15. Add therefor Part 3 Part 4: Do you own 16. Cash Example | er personal and here. S. Describe dollar value of all B. Write that numl Describe Your Fire or have any legal se: Money you have in | Books, CDs, DVDs & Family Photos of your entries from Part 3, including any entries for pages you have attached per here | \$ 100.00 \$1,850.00 Current value of the portion you own? Do not deduct secured claims or exemptions |
| 14. Any other No. Yes 15. Add therefor Part 3: Part 4: Do you own 16. Cash Example | er personal and here. S. Describe dollar value of all B. Write that numl Describe Your Fire or have any legal | Books, CDs, DVDs & Family Photos of your entries from Part 3, including any entries for pages you have attached per here | \$ 100.00 \$1,850.00 Current value of the portion you own? Do not deduct secured claims |

Roberta Case 16-38543 Doc 1 Debtor 1

Middle Name

Filed 12/06/16 Entered 12/06/16 17:45:22

Document Page 12 of 60 umber (if known) Desc Main

| 17. | Deposits of | f money | | | | |
|------------|--------------|------------------------|-------------------------------------|---|-----------|--------------|
| | Examples: (| Checking, savings, | , or other financial accounts; c | ertificates of deposit; shares in credit unions, brokerage houses, | | |
| | and other si | imilar institutions. I | f you have multiple accounts v | with the same institution, list each. | | |
| | No. | | | | | |
| | Yes. | Describe | Account Type: | Institution name: | | |
| | | | Checking Account | US Bank | \$ | 0.00 |
| | | | Savings Account | US Bank | | 0.00 |
| | | | Cavings / locount | - Dank | * | |
| | | | | | \$ | 0.00 |
| 18. | | - | ublicly traded stocks | | | |
| | | Bond funds, invest | ment accounts with brokerage | e firms, money market accounts | | |
| | No. | | | | | |
| | Yes. | Describe | Institution or issuer name: | : | | |
| | | | | | \$ | 0.00 |
| 19. | Non-public | ly traded stock | and interests in incorpor | rated and unincorporated businesses, including an interest in | | |
| | No. | | | | | |
| | Yes. | Describe | Name of Entity and Perce | ent of Ownership: | | |
| | | D0001100 | | | \$ | 0.00 |
| 20. | Governme | nt and corporate | e bonds and other negotia | able and non-negotiable instruments | * <u></u> | |
| | | = | - | checks, promissory notes, and money orders. | | |
| | - | | | o someone by signing or delivering them. | | |
| | No. | | • | , , , , | | |
| | Yes. | Describe | Issuer name: | | | |
| | 1 63. | Describe | loodor hamo. | | \$ | 0.00 |
| 21 | Retirement | or pension acc | ounts | | Ψ | |
| | | • | | thrift savings accounts, or other pension or profit-sharing plans | | |
| | No. | microsio in not, Ei | (10) t, 100g11, 40 1(t/), 400(b), t | Time savings associate, or sales periods of profit sharing plans | | |
| | = | | Time of account and locate | 4.45 | | |
| | Yes. | Describe | Type of account and Instit | tution name: | | 0.00 |
| | | | | | \$ | 0.00 |
| 22. | = | eposits and pre | · - | | | |
| | | | | ou may continue service or use from a company utilities (electric, gas, water), telecommunications | | |
| | No. | ngreements with it | andiords, prepaid rent, public t | idities (electric, gas, water), teleconfindinations | | |
| | = | | Land to the second of the second | LL | | |
| | Yes. | Describe | Institution name or individ | uai: | _ | 0.00 |
| | | | | | \$ | 0.00 |
| 23. | Annuities (| A contract for a | periodic payment of moi | ney to you, either for life or for a number of years) | | |
| | No. | | | | | |
| | Yes. | Describe | Issuer name and descript | ion: | | |
| | | | | | \$ | 0.00 |
| 24. | Interests in | an education I | RA, in an account in a qu | alified ABLE program, or under a qualified state tuition program. | | |
| | 26 U.S.C. § | § 530(b)(1), 529A | (b), and 529(b)(1). | | | |
| | No. | | | | | |
| | Yes. | Describe | Institution name and desc | cription. Separately file the records of any interests.11 U.S.C. § 521(c): | | |
| | _ | | | | \$ | 0.00 |
| 25. | Trusts, equ | itable or future | interests in property (oth | ner than anything listed in line 1), and rights or powers | · <u></u> | |
| | No. | | | | | |
| | Yes. | Describe | | | | |
| | 165. | Describe | | | • | 0.00 |
| 26 | Dotonto oc | nuriahta trada | marka trada agarata and | Lather intellectual property | • | <u>0.0</u> 0 |
| 20. | | | | l other intellectual property n royalties and licensing agreements | | |
| | No. | internet domain na | inics, websites, proceeds from | Troyalites and licensing agreements | | |
| | = | | | | | |
| | Yes. | Describe | | | | |
| ~ - | | | -44 | | \$ | 0.00 |
| 27. | - | • | other general intangibles | | | |
| | | bulluling permits, e | Acidative ilicenses, cooperative | association holdings, liquor licenses, professional licenses | | |
| | No. | | | | | |
| | Yes. | Describe | | | | |
| | | | | | , s | 0.00 |

Roberta Case 16-38543 Doc 1 Debtor 1

Filed 12/06/16
Document P

Desc Main

Middle Name

Entered 12/06/16 17:45:22 Page 13 of 60 umber (if known)

| Money or property owed to you? | | Current value of the portion you own? Do not deduct secured claims or exemptions |
|---|---------|--|
| 28. Tax refunds owed to you | | |
| ∐ No. | | |
| Yes. Describe Expected 2016 income tax refund | \$9,009 | \$ 9,009.00 |
| 29. Family support | | |
| Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement No. | | |
| Yes. Describe | | \$ 0.00 |
| 30. Other amounts someone owes you | | <u> </u> |
| Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else No. | | |
| Yes. Describe | | \$ 0.00 |
| 31. Interest in insurance policies | | |
| Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance No. Company Name & Beneficiary: | | |
| Yes. Describe | | |
| Term life insurance | \$0 | \$ 0.00 |
| 32. Any interest in property that is due you from someone who has died | | \$0.0 |
| If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. No. | | |
| Yes. Describe | | |
| | | \$0.00 |
| 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No. | | |
| Yes. Describe | | |
| 24. Other continuent and unlimited deliver of community including a country live of the deleter and sinks | | \$0.00 |
| 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights No. | | |
| Yes. Describe | | |
| Claim for injuries against former landlord, Patricia Barlow, Cook County case #16L-007276. Debtors attorney is Larry Fleischer, 312.641.7117. | | |
| Potential claim, Debtor v. CTA, fall, soft-tissue, no case filed. Attorney Marc Shuman. | | |
| Workers' compensation case, Debtor v. Halsted Financial Services, with attorney Marc Schuman | | \$ 0.00 |
| 35. Any financial assets you did not already list | | <u> </u> |
| No. | | |
| Yes. Describe | | \$0.00 |
| 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached | | |
| for Part 4. Write that number here> | | \$9,009.00 |
| | | |
| Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. | | |
| 37. Do you own or have any legal or equitable interest in any business-related property? No. | | |
| Yes. | | |
| | | Current value of the |
| | | portion you own? Do not deduct secured claims or exemptions |
| | | |

Filed 12/06/16 Entered 12/06/16 17:45:22

Document Page 14 of 60 Umber (if known) Roberta Case 16-38543 Doc 1

Desc Main

| 38. | Accounts | receivable or co | mmissions you already earned | |
|-----|--------------|---------------------|---|---------------------------------------|
| | No. | | | |
| | Yes. | Describe | | |
| | 0.00 | | | \$ <u> </u> |
| 39. | - | - | ngs, and supplies computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices | |
| | No. | Dusiness-related of | omputers, software, moderns, printers, copiers, rax macrimes, rugs, telephones, desas, chairs, electronic devices | |
| | Yes. | Describe | | |
| | L Tes. | Describe | | \$ 0.00 |
| 40 | Machinery | fixtures equin | ment, supplies you use in business, and tools of your trade | <u> </u> |
| 10. | No. | , incurso, equip | none, supplies you also in business, and tools of your radio | |
| | Yes. | Describe | | |
| | 1 es. | Describe | | \$ 0.00 |
| 41. | Inventory | | | · · · · · · · · · · · · · · · · · · · |
| | No. | | | |
| | Yes. | Describe | | |
| | 1 es. | Describe | | \$ 0.00 |
| 42. | Interests in | n partnerships o | r ioint ventures | , <u> </u> |
| | No. | | Name of Entity and Percent of Ownership: | |
| | Yes. | Describe | runie of Entity and 1 decent of ownership. | |
| | 1 es. | Describe | | s 0.00 |
| 43. | Customer | lists. mailing lis | ts, or other compilations | , <u> </u> |
| | No. | | | |
| | Yes. | Describe | | |
| | 103. | Describe | | \$ 0.00 |
| 44. | Anv busin | ess-related prop | erty you did not already list | · · · · · · · · · · · · · · · · · · · |
| | No. | | • | |
| | Yes. | Describe | | |
| | | Describe | | \$ 0.00 |
| | | | | • |
| 45. | Add the do | llar value of all | of your entries from Part 5, including any entries for pages you have attached | |
| | for Part 5. | Write that numb | er here> | \$ 0.00 |
| | | | | |
| F | Part 6: | Describe Any Fari | n- and Commercial Fishing-Related Property You Own or Have an Interest In. | |
| | ı | f you own or ha | ve an interest in farmland, list it in Part 1. | |
| 46. | Do you ow | n or have any le | gal or equitable interest in any farm- or commercial fishing-related property? | |
| | No. | | | |
| | Yes. | Describe | | |
| | | | | \$0.00 |
| 47. | Farm anim | | | |
| | | Livestock, poultry, | farm-raised fish | |
| | No. | | | |
| | Yes. | Describe | | |
| | | | | \$ <u>0.0</u> 0 |
| 48. | | her growing or l | narvested | |
| | No. | | | |
| | Yes. | Describe | | |
| 40 | F | ::- L:: · · | of transfer weakings flat was and to also flat and | \$ <u> </u> |
| 49. | | risning equipme | nt, implements, machinery, fixtures, and tools of trade | |
| | No. | _ | | |
| | Yes. | Describe | | |
| | Faunt | liabina a | phomicals and food | \$ <u> </u> |
| 50. | | nsning supplies | chemicals, and feed | |
| | No. | | | |
| | Yes. | Describe | | |
| | | | | \$ 0.00 |

btor 1 Roberta Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Page 15 of the Name Page 15 of the Name

| r itst ivalite witude ivalite Last ivalite | | |
|---|--------------|-----------------|
| 51. Any farm- and commercial fishing-related property you did not already list No. | | |
| Yes. Describe | | \$0 <u>.0</u> 0 |
| 52. Add the dollar value of all of your entries from Part 6, including any entries for pages for Part 6. Write that number here | • | \$0.00 |
| Part 7: Describe All Property You Own or Have an Interest in That You Did Not List About 1985 (1985) | ove | |
| 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership No. | | |
| Yes. Describe | | \$0.00 |
| 54. Add the dollar value of all of your entries from Part 7. Write that number here | > | \$0.00 |
| Part 8: List the Totals of Each Part of this Form | | |
| 55. Part 1: Total real estate, line 2 | | \$ 0.00 |
| 56. Part 2: Total vehicles, line 5 | \$ 1.00 | |
| 57. Part 3: Total personal and household items, line 15 | \$ 1,850.00 | |
| 58. Part 4: Total financial assets, line 36 | \$ 9,009.00 | |
| 59. Part 5: Total business-related property, line 45 | \$ 0.00 | |
| 60. Part 6: Total farm- and fishing-related property, line 52 | \$ 0.00 | |
| 61. Part 7: Total other property not listed, line 54 | \$ 0.00 | |
| 62. Total personal property. Add lines 56 through 61 | \$ 10,860.00 | \$ 10,860.00 |
| 63. Total of all property on Schedule A/B. Add line 55 + line 62 | | \$10,860.00 |

Official Form 106A/B Record # 632668 Schedule A/B: Property Page 6 of 6

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main

| Fill in this in | formation to identi | fy your case: | |
|---------------------|------------------------|------------------------------------|-----------------|
| Debtor 1 | Roberta | Leedora | Allen |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for t | he : <u>NORTHERN</u> District of _ | ILLINOIS(State) |
| Case Number | | | _ |
| (If known) | | | |

Official Form 106C

Schedule C: The Property You Claim as Exempt

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on Schedule A/B: Property (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of Part 2: Additional Page as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions-such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds-may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

| | fy the Property You Claim as Exempt | | | |
|----------------------------|--|--------------------------------------|---|--------------------------------------|
| | emptions are you claiming? Check | | • | |
| | ming state and federal nonbankrupt | | § 522(b)(3) | |
| You are clain | ming federal exemptions. 11 U.S.C. | § 522(b)(2) | | |
| For any propert | ry you list on <i>Schedule A/B</i> that yo | u claim as exempt, fill in t | the information below. | |
| • | on of the property and line on hat lists this property | Current value of the portion you own | Amount of the exemption you claim | Specific laws that allow exemption |
| | | Copy the value from Schedule A/B | Check only one box for each exemption | |
| Brief description: | Furniture, linens, small appliances, table & chairs, bedroom set | \$_1,000 | \$ | 735 ILCS 5/12-1001(b) - \$1,000.00 |
| Line from Schedule A/B: | <u>06</u> | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | TV, computer, printer, music collection, cell phone | \$ <u>500</u> | \$ | 735 ILCS 5/12-1001(b) - \$500.00 |
| Line from Schedule A/B: | <u>07</u> | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Necessary wearing apparel. | \$ <u>100</u> | \$ | 735 ILCS 5/12-1001(a),(e) - \$100.00 |
| Line from Schedule A/B: | <u>11</u> | | 100% of fair market value, up to any applicable statutory limit | |
| Brief description: | Everyday jewelry, costume jewelry | \$ <u>150</u> | \$ | 735 ILCS 5/12-1001(b) - \$150.00 |
| Line from Schedule A/B: | 12 | | 100% of fair market value, up to any applicable statutory limit | |
| | | | | |
| icial Form 106C | Record # 632668 | Schedule C: T | he Property You Claim as Exempt | Page 1 of |

Entered 12/06/16 17:45:22 Desc Main Case 16-38543 Doc 1 Filed 12/06/16 Page 17 of 60 Case Number (if known) Document Roberta Leedora Debtor 1 Middle Name Last Name **Additional Page** Part 2: Brief description of the property and line on Current value of the Amount of the exemption you claim Specific laws that allow exemption Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption Schedule A/B 735 ILCS 5/12-1001(a) - \$100.00 Brief Books, CDs, DVDs & Family description: Photos \$ 100 Line from 100% of fair market value, up to Schedule A/B: any applicable statutory limit Checking Account, US Bank, 0.00 735 ILCS 5/12-1001(b) - \$0.00 Brief \$_0 description: 100% of fair market value, up to Line from Schedule A/B: any applicable statutory limit Brief Savings Account, US Bank, 0.00 735 ILCS 5/12-1001(b) - \$0.00 \$ 0 description: Line from 100% of fair market value, up to 17 Schedule A/B: any applicable statutory limit Brief Expected 2016 income tax refund 735 ILCS 5/12-1001(g)(1)(2)(3) - \$8,242.00 \$ 9,009 description: 735 ILCS 5/12-1001(b) - \$767.00 Line from 100% of fair market value, up to 28 Schedule A/B: any applicable statutory limit 215 ILCS 5/238 - \$0.00 Brief Term life insurance \$ 0 description: Line from 100% of fair market value, up to 31 Schedule A/B: any applicable statutory limit 735 ILCS 5/12-1001(h)(4) - \$15,000.00 Brief Claim for injuries against former landlord, Patricia Barlow, Cook Unknown \$ 15,000 description: County case #16L-007276. Debtors attorney is Larry Line from 100% of fair market value, up to 34 Schedule A/B: any applicable statutory limit Brief 820 ILCS 305/21 - \$0.00 Workers' compensation case, Unknown Debtor v. Halsted Financial description: Services, with attorney Marc Schuman Line from 100% of fair market value, up to 34 Schedule A/B: any applicable statutory limit 3. Are you claiming a homestead exemption of more than \$155,675? (Subject to adjustment on 4/01/16 and every 3 years after that for cases filed on or after the date of adjustment.) Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case? ☐ Yes.

| Fill in this i | nformation to identi | fy your case: | | 8 of 6 | 50 | | |
|---|--|--|--|---|---|--|-----------------------------------|
| Debtor 1 | Roberta | Leedora | a Allen | | | | |
| Debtor 1 | First Name | Middle Name | Last Name | | | | |
| Debtor 2 | | | | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | | | | |
| United State | s Bankruptcy Court for t | he: NORTHERN | District of ILLINOIS | | | | |
| Office Otate | 3 Dankruptcy Court for t | ne . <u>Northern</u> | (State) | | | ☐Check if thi | - ! |
| Case Number | er | | | | | | 0.00 |
| (If known) | | | | | | amended fi | ling |
| <u> Official F</u> | orm 106D | | | | | | |
| Schodule | D. Craditar | s Who Have | Claims Secured I | hy Proporty | | | 12 |
| | | | ied people are filing together | | | | |
| ☐ No. C | heck this box and su | bmit this form to the | court with your other schedule | | | | |
| 2. List all se for each and As much 2.1 Honor | claim. If more than o as possible, list the o Finance | ms reditor has more than the creditor has a particular than the creditor than the credi | n one secured claim, list the c rticular claim, list the other cre al order according to the credit Describe the property that | reditor separately ditors in Part 2. ors name. secures the claim: | Column A Amount of claim Do not deduct the value of collateral \$ 8,585.00 | Column A Value of collateral that supports this claim | Column C Unsecured portion If any |
| 2. List all so for each of As much Honor Creditor's | ecured claims. If a calcaim. If more than of as possible, list the calcaim. | ms reditor has more than the creditor has a particular than the creditor than the credi | n one secured claim, list the curticular claim, list the other creat order according to the credit order according to the cred | reditor separately ditors in Part 2. ors name. secures the claim: | Column A Amount of claim Do not deduct the value of collateral \$ 8,585.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all se for each of As much 2.1 Honor Creditor's 909 Da | List All Secured Clai ecured claims. If a ciclaim. If more than of as possible, list the ciclaims. Finance s Name avis St Ste 260 | ms reditor has more than the creditor has a particular than the creditor than the credi | n one secured claim, list the curticular claim, list the other creat order according to the credit. Describe the property that a 2006 Pontiac G6 with over. As of the date you file, the | reditor separately ditors in Part 2. ors name. secures the claim: | Column A Amount of claim Do not deduct the value of collateral \$ 8,585.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all se for each of As much 2.1 Honor Creditor's 909 Da | ecured claims. If a ciclaim. If more than of as possible, list the ciclaim. Finance Is Name Is Name Is Street | ms reditor has more than the creditor has a particular than the creditor than the credi | n one secured claim, list the curticular claim, list the other creat order according to the credit. Describe the property that a 2006 Pontiac G6 with over. As of the date you file, the a contingent. | reditor separately ditors in Part 2. ors name. secures the claim: | Column A Amount of claim Do not deduct the value of collateral \$ 8,585.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all se for each of As much Honor Creditor's 909 Da Number | ecured claims. If a ciclaim. If more than of as possible, list the ciclaim. Finance Is Name Is Name Is Street | ms reditor has more than the creditor has a paclaims in alphabetical | n one secured claim, list the conticular claim, list the other creal order according to the credital order according to the cr | reditor separately ditors in Part 2. ors name. secures the claim: | Column A Amount of claim Do not deduct the value of collateral \$ 8,585.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all se for each and As much 2.1 Honor Creditor's 909 Da Number Evanst City | List All Secured Clai ecured claims. If a ciclaim. If more than of as possible, list the ciclaims. If more than of as possible, list the ciclaims. If more than of as possible, list the ciclaims. If more than of a specific properties are secured by the ciclaims. If more than of the ciclaims are secured by the ciclaims of the ciclaims are secured by the ciclaims. If more than of the ciclaims are secured by the ciclaims are secured by the ciclaims. If more than of a specific properties are secured by the ciclaims are secured by the ciclaims. If more than of as possible, list the ciclaims. If more than of as possible, list the ciclaims. If more than of as possible, list the ciclaims. If more than of as possible, list the ciclaims. If more than of as possible, list the ciclaims. If more than of as possible, list the ciclaims. If more than of as possible, list the ciclaims. If more than of as possible, list the ciclaims. If more than of as possible, list the ciclaims. If more than of a second by the ciclaims are second by the ciclaims are second by the ciclaims. If more than of a second by the ciclaims are second by | reditor has more than e creditor has a paclaims in alphabetical library and the control of the c | n one secured claim, list the curticular claim, list the other creat order according to the credit. Describe the property that a 2006 Pontiac G6 with over. As of the date you file, the a Contingent Unliquidated Disputed | reditor separately editors in Part 2. ors name. secures the claim: 100,000 miles | Column A Amount of claim Do not deduct the value of collateral \$ 8,585.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all set for each of As much 2.1 Honor Creditor's 909 Da Number Evanst City Who owe | ecured claims. If a ciclaim. If more than of as possible, list the ciclaims. If a ciclaim. If more than of as possible, list the ciclaim. If more than of as possible, list the ciclaim. If more than of a ciclaims is possible, list the ciclaims of the ciclaims. If a ciclaims is possible, list the ciclaims of the ciclaims. If a ciclaims of the ciclaim | reditor has more than e creditor has a paclaims in alphabetical library and the control of the c | n one secured claim, list the curticular claim, list the other creat order according to the credit. Describe the property that a 2006 Pontiac G6 with over. As of the date you file, the Contingent Unliquidated Disputed. | reditor separately editors in Part 2. ors name. secures the claim: 100,000 miles | Column A Amount of claim Do not deduct the value of collateral \$ 8,585.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all se for each of As much 2.1 Honor Creditor's 909 Da Number Evansi City Who owe | List All Secured Clai ecured claims. If a ciclaim. If more than of as possible, list the ciclaims. If a ciclaim. If more than of as possible, list the ciclaims. If a ciclaims are possible, list the ciclaims are possible. If a ciclaims are ciclaims. If a ciclaims are ciclaims are ciclaims are ciclaims. If a ciclaims are ciclaims are ciclaims are ciclaims. If a ciclaims are ciclaims are ciclaims are ciclaims are ciclaims. If a ciclaims are ciclaims are ciclaims are ciclaims are ciclaims are ciclaims are ciclaims. If a ciclaims are ciclaims are ciclaims are ciclaims are c | reditor has more than e creditor has a paclaims in alphabetical library and the control of the c | n one secured claim, list the curticular claim, list the other creat order according to the credit. Describe the property that a 2006 Pontiac G6 with over. As of the date you file, the a Contingent Unliquidated Disputed. Nature of Lien. Check all tha An agreement you made (see the continued of the continued | reditor separately editors in Part 2. ors name. secures the claim: 100,000 miles | Column A Amount of claim Do not deduct the value of collateral \$ 8,585.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2. List all se for each of As much 2.1 Honor Creditor's 909 Da Number Evansi City Who owe | List All Secured Clai ecured claims. If a ciclaim. If more than of as possible, list the ciclaims. If a ciclaim. If more than of as possible, list the ciclaims. If a cicla | reditor has more than e creditor has a paclaims in alphabetical library and the control of the c | n one secured claim, list the curticular claim, list the other creat order according to the credit. Describe the property that a 2006 Pontiac G6 with over. As of the date you file, the a Contingent Unliquidated Disputed. Nature of Lien. Check all that a greement you made (scar loan) | reditor separately iditors in Part 2. ors name. secures the claim: 100,000 miles claim is: Check all that apply at apply. such as mortgage or secured | Column A Amount of claim Do not deduct the value of collateral \$ 8,585.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 List all se for each of As much 2.1 Honor Creditor's 909 De Number Evanst City Who owe Debtor Debtor Debtor | ecured claims. If a ciclaim. If more than of as possible, list the ciclaims. If a ciclaim. If more than of as possible, list the ciclaim. If more than of as possible, list the ciclaim. If more than of as possible, list the ciclaim. If a ciclaim is possible, list the ciclaim is stated to ciclaim. If a ciclaim is the ciclaim. If a ciclaim is the ciclaim. If a ciclaim is the ciclai | reditor has more that the creditor has a packaims in alphabetical library and the cred | n one secured claim, list the curticular claim, list the other creat order according to the credit. Describe the property that a 2006 Pontiac G6 with over. As of the date you file, the Contingent Unliquidated Disputed Nature of Lien. Check all the An agreement you made (scar loan) Statutory lien (such as tax) | reditor separately ditors in Part 2. ors name. secures the claim: 100,000 miles claim is: Check all that appliat apply. such as mortgage or secured lien, mechanic's lien) | Column A Amount of claim Do not deduct the value of collateral \$ 8,585.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 List all se for each of As much 2.1 Honor Creditor's 909 De Number Evanst City Who owe Debtor Debtor Debtor | List All Secured Clai ecured claims. If a ciclaim. If more than of as possible, list the ciclaims. If a ciclaim. If more than of as possible, list the ciclaims. If a cicla | reditor has more that the creditor has a packaims in alphabetical library and the cred | n one secured claim, list the curticular claim, list the other creat order according to the credit. Describe the property that: 2006 Pontiac G6 with over. As of the date you file, the Contingent Unliquidated Disputed Nature of Lien. Check all the Car loan) Statutory lien (such as tax Judgment lien from a laws. | reditor separately ditors in Part 2. ors name. secures the claim: 100,000 miles claim is: Check all that appliat apply. such as mortgage or secured lien, mechanic's lien) | Column A Amount of claim Do not deduct the value of collateral \$ 8,585.00 | Value of collateral that supports this claim | Unsecured portion If any |
| 2.1 List all se for each of As much 2.1 Honor Creditor's 909 De Number Evanst City Who owe Debtor Debtor At leas | ecured claims. If a ciclaim. If more than of as possible, list the ciclaims. If a ciclaim. If more than of as possible, list the ciclaim. If more than of as possible, list the ciclaim. If more than of as possible, list the ciclaim. If a ciclaim is possible, list the ciclaim is stated to ciclaim. If a ciclaim is the ciclaim. If a ciclaim is the ciclaim. If a ciclaim is the ciclai | reditor has more that the creditor has a paclaims in alphabetical library and the creditor has a paclaims in alphabetical library and the creditor has a paclaims in alphabetical library and the creditor has a paclaims in alphabetical library and the creditor has a paclaims in alphabetical library and the creditor has a paclaim and the cred | n one secured claim, list the curticular claim, list the other creat order according to the credit. Describe the property that a 2006 Pontiac G6 with over. As of the date you file, the Contingent Unliquidated Disputed Nature of Lien. Check all the An agreement you made (scar loan) Statutory lien (such as tax) | reditor separately ditors in Part 2. ors name. secures the claim: 100,000 miles claim is: Check all that appliat apply. such as mortgage or secured lien, mechanic's lien) | Column A Amount of claim Do not deduct the value of collateral \$ 8,585.00 | Value of collateral that supports this claim | Unsecured portion If any |

| | | | Filod 12/06/16 | Entered 12/06/16 17:45:22 | 2 Desc Main | |
|--|--|--|--|---|--|--------------------------|
| Fill in this | information to identify your o | case: | | 9 of 60 | | |
| Debtor 1 | Roberta | Leedora | Allen | | | |
| | First Name | Middle Name | Last Name | | | |
| Debtor 2 (Spouse, if filing) |) First Name | Middle Name | Last Name | | | |
| (Opodac, ii iiiiig) | , I not wante | Widdle Name | Edstranic | | | |
| United State | es Bankruptcy Court for the : <u>N(</u> | ORTHERN District | of <u>ILLINOIS</u> (State) | | П | |
| Case Numb | er | | | | | this is an |
| | Tames 4005/5 | | | | amended | ı illirig |
| <u> Σπιciai i</u> | Form 106E/F | | | | | 12/15 |
| le as comple ist the other I/B: Property reditors with eeded, copy | party to any executory contr (Official Form 106A/B) and of partially secured claims that | Use Part 1 for created or unexpired on Schedule G: Ext are listed in Schenumber the entrieme and case number | ditors with PRIORITY claim leases that could result in ecutory Contracts and Une edule D: Creditors Who Ha s in the boxes on the left. I | as and Part 2 for creditors with NONPRIORITY a claim. Also list executory contracts on <i>Sch</i> expired Leases (Official Form 106G). Do not in ve Claims Secured by Property. If more space Attach the Continuation Page to this page. On | nedule nclude any e is | |
| 1. Do any cr | reditors have priority unsecu | red claims agains | t you? | | | |
| No. C | Go to Part 2. | | | | | |
| Yes. | | | | | | |
| each clair nonpriorit unsecure | m listed, identify what type of dry amounts. As much as possi | claim it is. If a claim ble, list the claims i ion Page of Part 1. | n has both priority and nonpi n alphabetical order accordi If more than one creditor ho | secured claim, list the creditor separately for eariority amounts, list that claim here and show being to the creditor's name. If you have more tha olds a particular claim, list the other creditors in uction booklet.) Total claim | oth priority and in two priority Part 3. | Nonpriority |
| | Lint All of Vous MONDRIODIT | v II d Cl-i | _ | | amount | amount |
| Part 2: | List All of Your NONPRIORITY | r Unsecured Claims | • | | | |
| _ | reditors have nonpriority uns | _ | - | | | |
| = | ou have nothing to report in t | his part. Submit th | is form to the court with you | r other schedules. | | |
| Yes. | | alaima in Aba alab | | and the balds are built and the second than become | an the an area | |
| nonpriorit included i | y unsecured claim, list the cre | ditor separately for ditor holds a partic | each claim. For each claim | or who holds each claim. If a creditor has mor listed, identify what type of claim it is. Do not lis litors in Part 3.If you have more than three nonp | st claims already | |
| Δmeri | ica S Financial Choice | | | 2833 | | Total claim \$ 490.00 |
| 7.1 | 's Name | Las | t 4 digits of account number | | | 3 -790.00 |
| | Van Buren St Ste 1 | Who | en was the debt incurred? | 2011-2011 | | |
| Number | r Street | | e falle e de la competitación de la della competitación de la comp | to Oracle Miller and | | |
| | | | of the date you file, the claim Contingent | ті з: Спеск ан тпат арріу. | | |
| Chica | | 0607 | Unliquidated | | | |
| City Who ow | State Z es the debt? Check one. | ip Code | Disputed | | | |
| = | or 1 only | | | | | |
| = | or 2 only | r i | e of NONPRIORITY unsecure | ed claim: | | |
| = | or 1 and Debtor 2 only | | Student loans Obligations arising out of a sepa | aration agreement or divorce | | |
| = | est one of the debtors and another ck if this claim relates to a | | that you did not report as priority | | | |
| | munity debt | | | ng plans, and other similar debts | | |
| | aim subject to offest? | _ | | | | |
| No | | | Other. Specify Collecting for | or Creditor | | |
| Yes | | | | | | |

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Page 20 of 60 Case Number (if known) Decument Roberta Leedora Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page

| After li | sting any entries on this page, number them be | eginning with 4.4, followed by 4.5, and so forth. | Total Claim |
|----------|--|---|--------------------|
| 4.2 | Chase Bank | Last 4 digits of account number | \$ <u>1,500.00</u> |
| | Creditor's Name | 2045 | |
| | PO Box 15298 | When was the debt incurred? 2015 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Wilmington DE 19850 | Unliquidated | |
| ١., | City State Zip Code | Disputed | |
| ľ | Who owes the debt? Check one. | | |
| | Debtor 1 only | Town (NONDRIADITY and a labor | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| ļ | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| [| Check if this claim relates to a community debt | that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts | |
| l 1 | s the claim subject to offest? | Debts to pension of profit-sharing plans, and other similar debts | |
| | No | Other. Specify Overdraft Account | |
| Ī | Yes | Other. Specify | |
| 4.3 | City of Chicago Bureau Parking | Last 4 digits of account number 5727 | \$ 800.00 |
| | Creditor's Name | 2000 | |
| | 121 N. LaSalle St | When was the debt incurred? 2006 | |
| | Number Street | | |
| | Room 107 | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago IL 60602 | Unliquidated | |
| ١, | City State Zip Code Who owes the debt? Check one. | Disputed | |
| l i | Debtor 1 only | | |
| l i | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| l i | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | = | that you did not report as priority claims | |
| " | Check if this claim relates to a community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| 1 | s the claim subject to offest? | | |
| | No | Other. Specify Debt Owed | |
| | Yes | | |
| 4.4 | City of Chicago Bureau Parking | Last 4 digits of account number 5745 | \$ <u>3,000.00</u> |
| | Creditor's Name | When was the debt incurred? 2016 | |
| | 121 N. LaSalle St | when was the debt incurred? | |
| | Number Street | | |
| | Room 107 | As of the date you file, the claim is: Check all that apply. | |
| | Chicago IL 60602 | Contingent | |
| | City State Zip Code | Unliquidated | |
| v | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| [| Debtor 1 and Debtor 2 only | Student loans | |
| أ | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| أ | Check if this claim relates to a | that you did not report as priority claims | |
| " | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ! | s the claim subject to offest? | | |
| | No | Other. SpecifyDebt Owed | |
| | Yes | | |

Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Case 16-38543 Doc 1 Page 21 of 60 Case Number (if known) Decument Roberta Leedora Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| L | 4.5 Commonwealth Edison | Last 4 digits of account number | \$_2,000.00 |
|----------|---|--|-------------------|
| | Creditor's Name | | |
| | 3 Lincoln Center 4th Floor | When was the debt incurred? | |
| | Number Street | | |
| | | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Oakbrook Terrace IL 60181 | Unliquidated | |
| | City State Zip Code | | |
| | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | T (NONDRIODITY | |
| | = ' | Type of NONPRIORITY unsecured claim: ☐ | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | bests to pension of profit-sharing plans, and other similal design | |
| | | | |
| | No | Other. Specify Utility Bills/Cellular Service | |
| \vdash | Yes | 24.5 | |
| L | Commonwealth Medical Group | Last 4 digits of account number 6149 | <u>\$2,200.00</u> |
| Г | Creditor's Name | | |
| | Box 681008 | When was the debt incurred? 2016 | |
| | Number Street | | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Milwaukee WI 53268 | | |
| | City State Zip Code | Unliquidated | |
| | Who owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | | that you did not report as priority claims | |
| | Check if this claim relates to a | | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | | |
| | No | Other. Specify Medical/Dental Services | |
| L | Yes | _ | |
| | 1.7 Dr. Rodrigue Tinfang | Last 4 digits of account number | <u>\$ 210.00</u> |
| Н | Creditor's Name | | |
| | 4909 W. Division St, Suite 503 | When was the debt incurred? | |
| | | | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago IL 60651 | _ | |
| | City State Zip Code | Unliquidated | |
| | Who owes the debt? Check one. | Disputed | |
| | _ | _ | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | ☐ Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | | that you did not report as priority claims | |
| | Check if this claim relates to a | | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is the claim subject to offest? | | |
| | No | Other. Specify Medical Debt | |
| | Yes | | |
| | | | |

Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Case 16-38543 Page 22 of 60 Case Number (if known) Decument Roberta Leedora Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page

| After li | sting any entries on this page, number them be | eginning with 4.4, followed by 4.5, and so forth. | Total Claim | | | | | |
|----------|--|---|---------------------|--|--|--|--|--|
| 4.8 | Enterprise Rent-A-Car | Last 4 digits of account number | \$ 500.00 | | | | | |
| | Creditor's Name | When was the debt incurred? 2014 | | | | | | |
| | 600 Corporate Park Dr | When was the debt incurred? | | | | | | |
| | Number Street | | | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | | | |
| | St. Louis MO 63105 | Contingent | | | | | | |
| | City State Zip Code | Unliquidated | | | | | | |
| _ v | Who owes the debt? Check one. | Disputed | | | | | | |
| | Debtor 1 only | | | | | | | |
| [| Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | | | |
| [| Debtor 1 and Debtor 2 only | Student loans | | | | | | |
| [| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | | | |
| | Check if this claim relates to a | that you did not report as priority claims | | | | | | |
| | community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | s the claim subject to offest? No | Bay and Dokt Owed | | | | | | |
| | Yes | Other. Specify Debt Owed | | | | | | |
| 4.9 | First Bank of Delaware | Last 4 digits of account number | \$ 750.00 | | | | | |
| 7.5 | Creditor's Name | | - | | | | | |
| | 1000 Rocky Run Parkway | When was the debt incurred? | | | | | | |
| | Number Street | | | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | | | |
| | | Contingent | | | | | | |
| | Wilmington DE 19803 | Unliquidated | | | | | | |
| v | City State Zip Code Who owes the debt? Check one. | Disputed | | | | | | |
| li | Debtor 1 only | | | | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | | | |
| l i | Debtor 1 and Debtor 2 only | Student loans | | | | | | |
| F | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | | | |
| | Check if this claim relates to a | that you did not report as priority claims | | | | | | |
| - | community debt | Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| ls ls | s the claim subject to offest? | | | | | | | |
| | No | Other. Specify Credit Card or Credit Use | | | | | | |
| \vdash | Yes Common Market (OMA) | | . 10 000 00 | | | | | |
| 4.10 | General Motors/GMAC | Last 4 digits of account number 2001 | \$ <u>40,800.00</u> | | | | | |
| | Creditor's Name 1040 South Rangeline Road | When was the debt incurred? 2005 | | | | | | |
| | Number Street | | | | | | | |
| | Box 749 | | | | | | | |
| | | As of the date you file, the claim is: Check all that apply. | | | | | | |
| | Carmel IN 46032 | Contingent | | | | | | |
| | City State Zip Code | Unliquidated | | | | | | |
| <u> </u> | Who owes the debt? Check one. | Disputed | | | | | | |
| | Debtor 1 only | | | | | | | |
| <u> </u> | Debtor 2 only | Type of NONPRIORITY unsecured claim: | | | | | | |
| <u> </u> | Debtor 1 and Debtor 2 only | ☐ Student loans | | | | | | |
| L | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | | | |
| [| Check if this claim relates to a | that you did not report as priority claims | | | | | | |
| | community debt s the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | | | | | | |
| | No | Out on the Deficiency Repold/Surrid Auto | | | | | | |
| | Yes | Other. Specify Deficiency, Repo'd/Surr'd Auto | | | | | | |
| _ | | | | | | | | |

Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Case 16-38543 Doc 1 Page 23 of 60 Case Number (if known) **Decument** Roberta Leedora Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.11 | Great American Finance/GAFCO/Onesource V | Last 4 digits of account number | 5238 | \$ 2,221.00 | | | | |
|------|--|--|------------------------------|--------------------|--|--|--|--|
| | Creditor's Name | | 2015 2016 | | | | | |
| | 20 N Wacker Dr Ste 2275 | When was the debt incurred? | 2015-2016 | | | | | |
| | Number Street | | | | | | | |
| | | As of the date you file, the claim is: | Check all that apply. | | | | | |
| | 01: | Contingent | | | | | | |
| | Chicago IL 60606 | Unliquidated | | | | | | |
| ١, | City State Zip Code Who owes the debt? Check one. | Disputed | | | | | | |
| | Debtor 1 only | _ | | | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured cl | laim: | | | | | |
| | Debtor 1 and Debtor 2 only | Student loans | | | | | | |
| i | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | | | | | | |
| i | Check if this claim relates to a | that you did not report as priority clai | ms | | | | | |
| ' | community debt | Debts to pension or profit-sharing pla | ans, and other similar debts | | | | | |
| | s the claim subject to offest? | | | | | | | |
| | No | Other. Specify Unknown Credit | Extension | | | | | |
| 4.40 | Yes HSBC/AFS | Look 4 dimits of social number | 3639 | \$ 1,600.00 | | | | |
| 4.12 | Creditor's Name | Last 4 digits of account number | | <u> </u> | | | | |
| | PO Box 5222 | When was the debt incurred? | 2007 | | | | | |
| | Number Street | | | | | | | |
| | | As of the date you file, the claim is: | Check all that apply | | | | | |
| | | Contingent | oncor all that apply. | | | | | |
| | Carol Stream IL 60197 | Unliquidated | | | | | | |
| Ι, | City State Zip Code | Disputed | | | | | | |
| | Who owes the debt? Check one. | | | | | | | |
| | Debtor 1 only Debtor 2 only | Turns of NONDRIORITY | latina. | | | | | |
| | Debtor 1 and Debtor 2 only | Type of NONPRIORITY unsecured cl | aim: | | | | | |
| | At least one of the debtors and another | Obligations arising out of a separation | n agreement or divorce | | | | | |
| | Check if this claim relates to a | that you did not report as priority clai | - | | | | | |
| ' | community debt | Debts to pension or profit-sharing pla | | | | | | |
| ! | s the claim subject to offest? | | | | | | | |
| | No | Other. Specify Credit Card or C | Credit Use | | | | | |
| | Yes Control of the Co | | 2004 | 0.400.00 | | | | |
| 4.13 | MRC Receivables Corp./Simply Fashion | Last 4 digits of account number | 9091 | \$ <u>2,100.00</u> | | | | |
| | Creditor's Name 8875 Aero Dr. | When was the debt incurred? | 2006 | | | | | |
| | Number Street | | | | | | | |
| | Namber Circle | | | | | | | |
| | | As of the date you file, the claim is: | Cneck all that apply. | | | | | |
| | San Diego CA 92133 | Contingent | | | | | | |
| | City State Zip Code | Unliquidated | | | | | | |
| ' | Who owes the debt? Check one. | Disputed | | | | | | |
| | Debtor 1 only | | | | | | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured cl | laim: | | | | | |
| | Debtor 1 and Debtor 2 only | Student loans | | | | | | |
| | At least one of the debtors and another | Obligations arising out of a separatio | | | | | | |
| | Check if this claim relates to a community debt | that you did not report as priority clai Debts to pension or profit-sharing pla | | | | | | |
| | s the claim subject to offest? | The pents to be usion or bront-snatting big | and dand similar ucuts | | | | | |
| | No | Other. Specify Credit Card or C | credit Use | | | | | |
| | Yes | | | | | | | |

Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Case 16-38543 Page 24 of 60 Case Number (if known) Decument Roberta Leedora Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4.14 | Nicor Gas | Last 4 digits of account number | \$ 1,800.00 |
|----------|---|---|---------------------|
| | Creditor's Name | | |
| | PO Box 549 | When was the debt incurred? 2012 | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Aurora IL 60507 | Unliquidated | |
| w | City State Zip Code /ho owes the debt? Check one. | Disputed | |
| Ï | Debtor 1 only | | |
| 7 | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| } | Debtor 1 and Debtor 2 only | Student loans | |
| ř | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| } | Check if this claim relates to a | that you did not report as priority claims | |
| - | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is | the claim subject to offest? | | |
| | No | Other. Specify Utility Bills/Cellular Service | |
| \vdash | Yes | | 1 000 00 |
| 4.15 | Northwestern Memorial Hospital | Last 4 digits of account number | \$ _1,200.00 |
| | Creditor's Name 251 E. Huron St. | When was the debt incurred? 2015 | |
| | Number Street | When was the dept incured? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | Chicago IL 60611 | Contingent | |
| | City State Zip Code | Unliquidated | |
| <u> </u> | /ho owes the debt? Check one. | Disputed | |
| | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| [| Debtor 1 and Debtor 2 only | Student loans | |
| [| At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| [| Check if this claim relates to a | that you did not report as priority claims | |
| | community debt the claim subject to offest? | Debts to pension or profit-sharing plans, and other similar debts | |
| | No | Maria Madical/Deptal Conject | |
| | Yes | Other. Specify Medical/Dental Services | |
| 4.16 | Nothwestern Medicine | Last 4 digits of account number | \$ 1,154.00 |
| 4.10 | Creditor's Name | | |
| | 28155 Network Place | When was the debt incurred? | |
| | Number Street | | |
| | | As of the date you file, the claim is: Check all that apply. | |
| | | Contingent | |
| | Chicago IL 60673 | Unliquidated | |
| w | City State Zip Code /ho owes the debt? Check one. | Disputed | |
| ľ | Debtor 1 only | | |
| | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | Debtor 1 and Debtor 2 only | Student loans | |
| | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Check if this claim relates to a | that you did not report as priority claims | |
| - | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| Is | the claim subject to offest? | | |
| | No | Other. Specify Medical Debt | |
| | Yes | | |

Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Case 16-38543 Page 25 of 60 Case Number (if known) Decument Roberta Leedora Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim**

| 4 | .17 | Peoples Gas | Last 4 digits of account number | \$ 1,500.00 |
|---|-----|---|---|--------------------|
| Г | | Creditor's Name | | |
| н | | 200 E. Randolph Dr. | When was the debt incurred? 2016 | |
| ш | | Number Street | | |
| ш | | | | |
| ш | | | As of the date you file, the claim is: Check all that apply. | |
| ш | | | Contingent | |
| ш | | Chicago IL 60601 | Unliquidated | |
| ш | | City State Zip Code | | |
| ш | W | ho owes the debt? Check one. | Disputed | |
| ш | | Debtor 1 only | | |
| ш | Ē | ā ' | Time of NONDBIODITY improving a laim. | |
| ш | 늗 | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ш | L | Debtor 1 and Debtor 2 only | Student loans | |
| ш | | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| ш | Ē | Check if this claim relates to a | that you did not report as priority claims | |
| ш | L | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ш | le | the claim subject to offest? | Debts to pension of profestioning plans, and other similar debts | |
| ш | | No | | |
| ш | - | | Other. Specify Utility Bills/Cellular Service | |
| Н | _ | Yes | | |
| 4 | .18 | Robert J. Semrad & Associates/Debt Stoppers | Last 4 digits of account number | \$ <u>0.00</u> |
| Г | | Creditor's Name | | |
| ш | | 20 S. Clark St., 28th floor | When was the debt incurred? | |
| ш | | Number Street | | |
| ш | | | | |
| ш | | | As of the date you file, the claim is: Check all that apply. | |
| ш | | | Contingent | |
| ш | | Chicago IL 60603 | Unliquidated | |
| ш | | City State Zip Code | | |
| ш | W | ho owes the debt? Check one. | Disputed | |
| ш | | Debtor 1 only | | |
| ш | F | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| ш | F | a | | |
| ш | L | Debtor 1 and Debtor 2 only | Student loans | |
| ш | | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| ш | Г | Check if this claim relates to a | that you did not report as priority claims | |
| ш | | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| ш | Is | the claim subject to offest? | | |
| ш | | No | Attemporals Form 9 Notice | |
| ш | - | ā | Other. Specify Attorney's Fees & Notice | |
| Н | - | Yes | | ÷ 2 500 00 |
| 4 | .19 | Robert Morris College | Last 4 digits of account number | \$ 3,500.00 |
| ш | | Creditor's Name | 0045 | |
| ш | | 401 S. State Street | When was the debt incurred? 2015 | |
| ш | | Number Street | | |
| ш | | | | |
| ш | | | As of the date you file, the claim is: Check all that apply. | |
| ш | | | Contingent | |
| ш | | Chicago IL 60605 | Unliquidated | |
| ш | | City State Zip Code | Disputed | |
| ш | W | ho owes the debt? Check one. | Disputed | |
| ш | | Debtor 1 only | | |
| | ŕ | Debtor 2 only | Type of NONPRIORITY unsecured claim: | |
| | F | Debtor 1 and Debtor 2 only | Student loans | |
| | Ļ | = | | |
| | L | At least one of the debtors and another | Obligations arising out of a separation agreement or divorce | |
| | Γ | Check if this claim relates to a | that you did not report as priority claims | |
| | _ | community debt | Debts to pension or profit-sharing plans, and other similar debts | |
| | Is | the claim subject to offest? | | |
| | | No | Other Specify | |
| | f | ā | Other. Specify | |
| _ | | Yes | | |

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main

Page 26 of 60 Case Number (if known) **Decument** Roberta Leedora Debtor 1 Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.4, followed by 4.5, and so forth. **Total Claim** West Suburban Hospital \$ 830.00 Last 4 digits of account number Creditor's Name 2016 PO Box 4746 When was the debt incurred? Number As of the date you file, the claim is: Check all that apply. Contingent 60197-4746 Carol Stream Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Debtor 1 and Debtor 2 only Student loans At least one of the debtors and another Obligations arising out of a separation agreement or divorce that you did not report as priority claims Check if this claim relates to a Debts to pension or profit-sharing plans, and other similar debts community debt Is the claim subject to offest? No Other. Specify Medical/Dental Service Yes West Suburban Medical Center \$ 5,015.00 4.21 Last 4 digits of account number Creditor's Name 3 Erie Court When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Oak Park 60302 IL Unliquidated City State Zip Code Disputed Who owes the debt? Check one. Debtor 1 only Debtor 2 only Type of NONPRIORITY unsecured claim: Student loans Debtor 1 and Debtor 2 only

Obligations arising out of a separation agreement or divorce

Debts to pension or profit-sharing plans, and other similar debts

that you did not report as priority claims

Other. Specify Medical Debt

At least one of the debtors and another

Check if this claim relates to a

community debt
Is the claim subject to offest?

No

Case 16-38543

Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main

Roberta Debtor 1

Leedora

Decument

Page 27 of 60 Case Number (if known)

List Others to Be Notified for a Debt That You Already Listed

| 5. | Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page. | | | | | | | |
|----|--|-------------------------|--|---|--|--|--|--|
| | Clerk, First Mun Div | _ | On which entry in Part 1 or Part 2 list the original creditor? | | | | | |
| | Name 50 W. Washington St., Rm. 1001 | | Line 3 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | | |
| | Number Street | - | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | Chicago IL City State Zip G | - 60602 - Code | Last 4 digits of account number | 5727 | | | | |
| | Baker & Miller, PC | _ | On which entry in Part 1 or Part 2 li | st the original creditor? | | | | |
| | Name 29 N. Wacker Dr., 5th floor Number Street | - | Line 3 of (Check one): | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | Chicago IL | 60606 | Last 4 digits of account number | | | | | |
| | City State Zip | - | | | | | | |
| | Clerk, First Mun Div | _ | On which entry in Part 1 or Part 2 lis | st the original creditor? | | | | |
| | Name 50 W. Washington St., Rm. 1001 | | Line4 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | | |
| | Number Street | - | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | Chicago IL City State Zip C | 60602 | Last 4 digits of account number | <u> 5745</u> | | | | |
| | Baker & Miller, PC | , out | On which cuture in Bout 4 on Bout 2 li | at the principal analytics? | | | | |
| | Name | - | On which entry in Part 1 or Part 2 lis | | | | | |
| | 29 N. Wacker Dr., 5th floor Number Street | - | Line 4 of (Check one): | Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | | - | | _ , | | | | |
| | Chicago IL | 60606 | Last 4 digits of account number | 5745 | | | | |
| | City State Zip | Code | | | | | | |
| | Midland Funding, LLC Name | - | On which entry in Part 1 or Part 2 lis | _ | | | | |
| | 8875 Aero Drive, # 200 | - | Line 9 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | | |
| | Number Street | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | San Diego CA | 92123 | Last 4 digits of account number | | | | | |
| _ | City State Zip C | Code | | | | | | |
| | Midland Credit Management | _ | On which entry in Part 1 or Part 2 lis | st the original creditor? | | | | |
| | Name 2365 Northside Dr | - | Line 9 of (Check one): | Part 1: Creditors with Priority Unsecured Claims | | | | |
| | Number Street Suite 300 | | | Part 2: Creditors with Nonpriority Unsecured Claims | | | | |
| | | - | | | | | | |
| | | 92108 - Code | Last 4 digits of account number | | | | | |
| _ | · | | | | | | | |

| ebtor 1 | Roberta | Leedora | Ц _R cur | nent | Page 28 of 6 | () Number (if known) |
|--------------|----------------------------|-------------|--------------------|------------|-------------------------------|---|
| | First Name | Middle Name | Last Name | | | , , |
| Clerk | First Mun Div | | | On which | n entry in Part 1 or Part 2 I | ist the original creditor? |
| Name 50 W | Washington St., Rm. 1001 | | _ | Line10 | of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Numbe | Street | | - | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Chica | go | IL | - 60602 | Last 4 di | gits of account number _ | 2001 |
| City | | State Zip 0 | Code | | | |
| Jame | s M. Philbrick | | - | On which | n entry in Part 1 or Part 2 I | ist the original creditor? |
| | . Jackson Blvd, 1025 | | _ | Line10 | of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Numbe | Street | | | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Chica | go | IL | _60604 | Last 4 di | gits of account number _ | 2001 |
| City | | State Zip | Code | | | |
| | First Mun Div | | _ | On which | n entry in Part 1 or Part 2 I | ist the original creditor? |
| Name 50 W | Washington St., Rm. 1001 | | _ | Line12 | of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Numbe | Street | | - | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Chica | go | IL | 60602 | Last 4 di | gits of account number _ | <u>3639</u> |
| City | | State Zip 0 | Code | | | |
| | Hasenmiller Leibsker & Mod | ore LLC | _ | On which | n entry in Part 1 or Part 2 I | ist the original creditor? |
| Name 8605 | Broadway | | | Line12 | of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Numbe | Street | | _ | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Merril | lville | IN | - _46410 - | Last 4 di | gits of account number _ | 3639 |
| Clerk | First Mun Div | State Zip | Code | | | |
| | T II SE WAIT BIV | | _ | On which | n entry in Part 1 or Part 2 I | ist the original creditor? |
| Name 50 W | Washington St., Rm. 1001 | | _ | Line1 | of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Numbe | Street | | | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Chica | go | IL. | 60602 | Last 4 di | gits of account number _ | 9091 |
| City | | State Zip C | Code | | | |
| Blatt I | Hasenmiller Leibsker & Mod | ore LLC | _ | On which | n entry in Part 1 or Part 2 I | ist the original creditor? |
| Name 8605 | Broadway | | | Line1 | of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Numbe | | | _ | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Merril | lville | IN | - 46410 | l ast 4 di | gits of account number _ | 9091 |
| City | | State Zip | _ | | | |
| North | western Medicine | | _ | On whicl | n entry in Part 1 or Part 2 I | ist the original creditor? |
| Name 2815 | 5 Network Place | | _ | Line 1 | of (Check one): | Part 1: Creditors with Priority Unsecured Claims |
| Numbe | Street | | | | | Part 2: Creditors with Nonpriority Unsecured Claims |
| Chica | go | IL | 60673 | Last 4 di | gits of account number _ | |
| City | - | State Zip C | _ | | | |

Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Case 16-38543 Page 29 of 60 Case Number (if known) Decument Roberta Leedora Debtor 1 First Name Last Name Clerk, First Mun Div On which entry in Part 1 or Part 2 list the original creditor? Name 50 W. Washington St., Rm. 1001 Line 20 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claims Street Number IL 60602 Chicago Last 4 digits of account number _____ 8869 City State Zip Code Weltman, Weinberg & Reis Co. On which entry in Part 1 or Part 2 list the original creditor? Name Line 20 of (Check one): Part 1: Creditors with Priority Unsecured Claims 180 N. LaSalle St., Ste. 2400 Part 2: Creditors with Nonpriority Unsecured Claims Number Street

Last 4 digits of account number ____

60601

State Zip Code

8869

Chicago

Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Case 16-38543 Page 30 of 60 Case Number (if known)

Roberta Debtor 1

Leedora

or divorce that you did not report as priority

6h. Debts to pension or profit-sharing plans, and other

6i. Other. Add all other nonpriority unsecured claims.

claims

similar debts

Write that amount here.

6j. Total. Add lines 6f through 6i.

Decument

0.00

70,470.00

73,970.00

| | | | Total claim | |
|-----------------------------|--|-----|-------------|----------|
| Total claims from Part 1 | 6a. Domestic support obligations | 6a. | \$ | 0.00 |
| | 6b. Taxes and Certain other debts you owe the government | 6b. | \$ | 0.00 |
| | 6c. Claims for death or personal injury while you were intoxicated | 6c. | \$ | 0.00 |
| | 6d. Other. Add all other priority unsecured claims. Write that amount here. | 6d. | \$ | 0.00 |
| | 6e. Total. Add lines 6a through 6d. | 6e. | \$ | 0.00 |
| | | | Total claim | |
| Total claims | 6f. Student loans | 6f. | \$ | 3,500.00 |
| | 6g. Obligations arising out of a separation agreement | 6g. | \$ | 0.00 |

| | | Caso 16 | | iilod 12/06/16 | Entor | ed 12/06/16 17:4 | 5:22 | Desc Main | |
|-------|-----------------------------------|----------------------|---|-----------------------------|-------------|--|---------------------------|---------------------------------|------|
| Fi | II in this in | formation to ident | tify your case: | | | 1 of 60 | | | |
| D | ebtor 1 | Roberta | Leedora | Allen | - | | | | |
| D | ebtor 2 | First Name | Middle Name | Last Name | | | | | |
| | pouse, if filing) | First Name | Middle Name | Last Name | - | | | | |
| U | nited States | Bankruptcy Court for | the : <u>NORTHERN</u> District of <u>I</u> | | | | | | |
| | ase Number f known) | | | (State) | | | | Check if this is amended filing | an |
| Off | icial F | orm 106G | | | | | | | |
| | | | ory Contracts and I | Unexpired Lea | ses | | | | 12/1 |
| Be as | complete mation. If n | and accurate as p | possible. If two married people ded, copy the additional page, | are filing together, bot | h are equal | ly responsible for supplying attach it to this page. On th | g correct e top of any | 1 | |
| | | - | e and case number (if known). | | | | | | |
| 1. [| _ | - | contracts or unexpired leases? ubmit this form to the court with | your other schedules. Y | 'ou have no | thing else to report on this fo | ırm | | |
| [| _ | | nation below even if the contract | | | | | | |
| - | | | nation bolow even in the contract | o or readed are noted in | Corrodato 7 | va. i roporty (emolar i emi i | 00/12/ | | |
| | | | or company with whom you have | | | | | | |
| | xample, re inexpired le | | cell phone). See the instructions | s for this form in the inst | ruction boo | klet for more examples of exe | ecutory cont | tracts and | |
| | Person or | company with wh | nom you have the contract or le | ease | | State what the contra | ct or lease i | is for | |
| 2.1 | 1 | | | | | | | | |
| | Name | | | | - | | | | |
| | Nicoshan | Oterest | | | _ | | | | |
| | Number | Street | | | | | | | |
| | City | | State Zip C | Code | _ | | | | |
| 2.2 | | | | | | | | | |
| | Name | | | | _ | | | | |
| | Number | Street | | | - | | | | |
| | | | 0.1.7.6 | | _ | | | | |
| | City | | State Zip C | Code | | | | | |
| 2.3 | | | | | _ | | | | |
| | Name | | | | _ | | | | |
| | Number | Street | | | | | | | |
| | City | | State Zip C | Code | _ | | | | |
| | 1 | | | | | | | | |
| 2.4 | | | | | _ | | | | |
| | Name | | | | _ | | | | |
| | Number | Street | | | | | | | |
| | City | | State Zip C | Code | _ | | | | |
| 2.5 | | | | | | | | | |
| | Name | | | | _ | | | | |
| | | <u> </u> | | | _ | | | | |
| | Number | Street | | | | | | | |

State Zip Code

City

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main

| Fill in this in | nformation to identi | fy your case: | |
|---------------------|------------------------|-------------------------------------|-----------|
| Debtor 1 | Roberta | Leedora | Allen |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for t | the : <u>NORTHERN</u> District of _ | |
| Case Number | r | | (State) |
| (If known) | | | |

Official Form 106H

Schedule H: Your Codebtors 12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

| any Additional Pages, write your name and case number (if known). Answer every question. | | | | | | | | | |
|--|--|--|-------------------------------|---------------------|--|--|--|--|--|
| 1. D | 1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.) | | | | | | | | |
| | No. | | | | | | | | |
| | Yes | | | | | | | | |
| | = | s, have you lived in a commur aho, Lousiiana, Nevada, New M | | | roperty states and territories include Visconsin.) | | | | |
| | No. Go to line 3. | | | | | | | | |
| | Yes. Did your sp | ouse, former spouse, or legal ec | uivalent live with you at the | time? | | | | | |
| | _ | n community state or territory die | d you live? | Fill in the n | ame and current address of that person. | | | | |
| | Name of your spo | use, former spouse or legal equivalent | | | | | | | |
| | Number St | reet | | | | | | | |
| | City | | State | Zip Code | | | | | |
| 3 In | - | f vour codebtors. Do not inclu | | • | is filing with you. List the person | | | | |
| | | Form 106D), Schedule E/F (Off edule G to fill out Column 2. debtor | icial Form 106E/F), or Sche | dule G (Official Fo | Column 2: The creditor to whom you owe the debt Check all schedules that apply: | | | | |
| 3.1 | | | | | Schedule D, line | | | | |
| | Name | | | _ | Schedule E/F, line | | | | |
| | Number Stre | et | | | Schedule G, line | | | | |
| | City | S | tate Z | Zip Code | | | | | |
| 3.2 | | | | _ | Schedule D, line | | | | |
| | Name | | | _ | Schedule E/F, line | | | | |
| | Number Stre | et | | _ | Schedule G, line | | | | |
| | City | S | tate Z | Zip Code | _ | | | | |
| 3.3 | | | | _ | Schedule D, line | | | | |
| | Name | | | _ | Schedule E/F, line | | | | |
| | Number Stre | et | | | Schedule G, line | | | | |
| | City | S | tate Z | Zip Code | | | | | |

Official Form 106H Record # 632668 Schedule H: Your Codebtors Page 1 of 1

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main

| Fill in this in | formation to identi | fy your case: | | |
|---------------------|---------------------|----------------------------------|------------|--|
| Debtor 1 | Roberta | Leedora | Allen | |
| | First Name | Middle Name | Last Name | |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| Case Number | | the : <u>NORTHERN DISTRICT O</u> | F ILLINOIS | Check if this is: |
| (If known) | | | | An amended filing |
| | | | | A supplement showing post-petition |
| | | | | chapter 13 income as of the following date |
| fficial F | orm 106I | | | MM / DD / YYYY |

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| Pa | Tt 1: Describe Employment | | | | |
|----|--|---|--|--------------|-----------------------------------|
| 1. | Fill in your employment information | | Debtor 1 | | Debtor 2 or non-filing spouse |
| | If you have more than one job, attach a separate page with information about additional employers. | Employment status | X Employed Not employed | | Employed Not employed |
| | Include part-time, seasonal, or self-employed work. | Occupation | Representative | | None |
| | Occupation may Include student or homemaker, if it applies. | Employers name | ENOVA | | |
| | | Employers address | 175 W. Jackson, S Chicago, IL 60604 | | |
| | | How long employed there? | 8 months | | , |
| Pa | It 2: Give Details About Month | | o monuis | | |
| | Estimate monthly income as of the spouse unless you are separated. If you or your non-filing spouse has lines below. If you need more space | the date you file this form. If you have more than one employer, comb | ine the information for a | | |
| | | | | For Debtor 1 | For Debtor 2 or non-filing spouse |
| 2. | List monthly gross wages, salary and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be. | | | \$3,612.27 | \$0.00 |
| 3. | 3. Estimate and list monthly overtime pay. | | | \$0.00 | \$0.00 |
| 4. | Calculate gross income. Add line | e 2 + line 3. | | \$3,612.27 | \$0.00 |

 Official Form 106I
 Record #
 632668
 Schedule I: Your Income
 Page 1 of 2

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Page 34 of 60

Document Roberta Leedora Debtor 1 Case Number (if known) First Name Middle Name Last Name

| | | | | For Debtor 1 | | For Debtor 2 or non-filing spouse | | | | | |
|---|---|---|----------|-----------------|-----|--------------------------------------|-----|---|--|--|--|
| | Copy | line 4 here | 4. | \$3,612.27 | | \$0.00 |] | | | | |
| 5. L | ist all | payroll deductions: | | | • | | _ | | | | |
| | 5a. T | ax, Medicare, and Social Security deductions | 5a. | \$276.34 | | \$0.00 | | | | | |
| | 5b. N | landatory contributions for retirement plans | 5b. | \$0.00 | | \$0.00 | | | | | |
| | 5c. V | oluntary contributions for retirement plans | 5c. | \$0.00 | | \$0.00 | | | | | |
| | 5d. F | Required repayments of retirement fund loans | 5d. | \$0.00 | | \$0.00 | | | | | |
| | 5e. lı | nsurance | 5e. | \$0.00 | | \$0.00 | | | | | |
| | 5f. D | omestic support obligations | 5f. | \$0.00 | | \$0.00 | | | | | |
| 5g. Union dues | | Inion dues | 5g. | \$0.00 | | \$0.00 | | | | | |
| 5h. Other deductions. Specify: | | | 5h. | \$0.00 | | \$0.00 | | | | | |
| 6. Add the payroll deductions . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g +5h. | | | | \$276.34 | | \$0.00 | | | | | |
| 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. | | | | \$3,335.93 | ĺ | \$0.00 | 1 | | | | |
| 8. Li | st all o | other income regularly received: | | , , | | · | 1 | | | | |
| | 8a. | Net income from rental property and from operating a business, | | | | | | | | | |
| | | profession, or farm | | | | | | | | | |
| | | Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | | | | |
| | | monthly net income. | 8a. | \$0.00 | | \$0.00 | | | | | |
| | 8b. | Interest and dividends | 8b. | \$0.00 | - | \$0.00 | | | | | |
| | 8c. | Family support payments that you, a non-filing spouse, or a | 8c. | \$ 611.00 | | \$ 0.00 | | | | | |
| | | dependent regularly receive | - | | | | | | | | |
| | | Include alimony, spousal support, child support, maintenance, divorce | | | | | | | | | |
| | | settlement, and property settlement. | | | | | | | | | |
| | 8d. | Unemployment compensation | 8d. | \$0.00 | _ | \$0.00 | | | | | |
| | 8e. | Social Security | 8e. | \$0.00 | _ | \$0.00 | | | | | |
| | 8f. | Other government assistance that you regularly receive | 8f. | \$0.00 | | \$0.00 | | | | | |
| | | Include cash assistance and the value (if known) of any non-cash | | | | | | | | | |
| | | assistance that you receive, such as food stamps (benefits under the | | | | | | | | | |
| | | Supplemental Nutrition Assistance Program) or housing subsidies. | | | | | | | | | |
| | | Specify: | | | | | | | | | |
| | 8g. | Pension or retirement income | 8g. - | \$0.00 | _ | \$0.00 | | | | | |
| | 8h. | Other monthly income. Specify: | 8h. - | \$0.00 | _ | \$0.00 | | | | | |
| 9. | Add | all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. | 9. | \$611.00 | _ | \$0.00 | | | | | |
| 10. | Calc | ulate monthly income. Add line 7 + line 9. | 10. | \$3,946.93 | + Г | \$0.00 | = Г | \$3,946.93 | | | |
| | Add | the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | L | 40,01010 | | 40.00 | L | + + + + + + + + + + + + + + + + + + + | | | |
| 11. | State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. | | | | | | | | | | |
| | Specify: 11 | | | | | | | | | | |
| 12. | 2. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. | | | | | | | | | | |
| | Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies 12. | | | | | | | | | | |
| 13. | x 1 | ou expect an increase or decrease within the year after you file this form No. Yes. Explain: | 1? | | | | _ | | | | |

| FIII IN t | nis information to identify | your case: | | | | | | | | | | | |
|---|---|--|------------------------------------|---|-----------------|--------------------------------|--|--|--|--|--|--|--|
| Debtor Debtor (Spouse, it | First Name | Leedora Middle Name Middle Name | Allen Last Name Last Name | — | • | t-petition chapter 13 date: | | | | | | | |
| Case N | lumber | | - ILLINOIO | MM / DD / | YYYY | | | | | | | | |
| (If known) A separate filing for Debtor 2 because Debtor 2 | | | | | | | | | | | | | |
| Officia | Official Form 106J maintains a separate household. | | | | | | | | | | | | |
| Sche | dule J: Your Ex | (penses | | | | 12/14 | | | | | | | |
| | | | = = | re equally responsible for supplyi les, write your name and case nun | = | | | | | | | | |
| Part 1: | Describe Your Househol | ld | | | | | | | | | | | |
| | s a joint case? No. Go to line 2. Yes. Does Debtor 2 live in a No. Yes. Debtor 2 mi | a separate household? ust file a separate Schedul | e J. | | | | | | | | | | |
| | you have dependents? not list Debtor 1 and | No X Yes Fill out | this information for | Dependent's relationship to Debtor 1 or Debtor 2 | Dependent's age | Does dependent live with you? | | | | | | | |
| | btor 2. | 100.1 111 001 | dent | Son | 19 | No | | | | | | | |
| | not state the dependents' mes. | | | | | X Yes No | | | | | | | |
| | | | | Son | 17 | X Yes | | | | | | | |
| | | | | Daughter | 11 | No X Yes X No Yes X No Yes | | | | | | | |
| exp | your expenses include penses of people other than urself and your dependents | | | | | · <u></u> | | | | | | | |
| Part 2: | Estimate Your Ongoing | | | | | | | | | | | | |
| expenses the applic | s as of a date after the bank cable date. | cruptcy is filed. If this is a | supplemental <i>Schedule J</i> , o | as a supplement in a Chapter 13 check the box at the top of the for | | | | | | | | | |
| Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form 106I.) Your expenses | | | | | | | | | | | | | |
| any | e rental or home ownership y rent for the ground or lot. not included in line 4: | expenses for your reside | ence. Include first mortgage | payments and | 4. | \$1,275.00 | | | | | | | |
| 4a. | Real estate taxes | | | | 4a. | \$0.00 | | | | | | | |
| 4b. Property, homeowner's, or renter's insurance 4b. | | | | | | | | | | | | | |
| 4c. | | | | | 4c. 4d. | \$15.00 \$0.00 | | | | | | | |
| | . Homeowner a association | 1 S. Sondominium dues | | | ⊤u. | Ψ0.00 | | | | | | | |

Page 1 of 3

Entered 12/06/16 17:45:22 Desc Main Filed 12/06/16 Case 16-38543 Doc 1

Roberta Debtor 1

First Name

Leedora

Middle Name

Document

Last Name

Page 36 of 60

Case Number (if known) __

Your expenses \$0.00 5 Additional Mortgage payments for your residence, such as home equity loans 6. **Utilities:** \$500.00 6a. 6a. Electricity, heat, natural gas \$0.00 6b. Water, sewer, garbage collection \$346.00 Telephone, cell phone, internet, satellite, and cable service \$ 0.00 Other. Specify: 6d. \$800.00 7. 7. Food and housekeeping supplies \$75.00 8. 8. Childcare and children's education costs \$200.00 9. Clothing, laundry, and dry cleaning 10. \$85.00 Personal care products and services 10. \$100.00 11. Medical and dental expenses 11. \$332.00 **Transportation.** Include gas, maintenance, bus or train fare. 12. Do not include car payments. \$80.00 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 Charitable contributions and religious donations 14. 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. \$0.00 15a. 15a Life insurance \$0.00 15b. Health insurance 15b. \$100.00 15c. Vehicle insurance 15c. \$0.00 15d. 15d. Other insurance. Specify: 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: \$0.00 17a. 17a. Car payments for Vehicle 1 \$0.00 17b. Car payments for Vehicle 2 17b \$0.00 17c. 17c. Other. Specify:_ \$0.00 17d. Other. Specify: 17d. 18. Your payments of alimony, maintenance, and support that you did not report as deducted \$0.00 from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18. 19. Other payments you make to support others who do not live with you. \$0.00 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. \$ 0.00 20b. Real estate taxes \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. 20d. Maintenance, repair, and upkeep expenses \$ 0.00 20e 20e. Homeowner's association or condominium dues

Official Form 106J Record # 632668 Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 37 of 60 Case Number (if known)

| Deptor | 1 1000 | LCCGOIG | 7 (11011 | Case Number (If known) | | |
|--------|----------|---|---------------------------------------|------------------------|---------------|------------|
| | First Na | me Middle Name | Last Name | | | |
| 21. | Other. S | Specify:Postage/Bank Fees (\$5.00), | | _ | 21. | \$5.00 |
| 22 | Your mo | nthly expense: Add lines 4 through 21. | | | 22. | \$3,938.00 |
| | The resu | It is your monthly expenses. | | | | |
| | | | | | | |
| | | | | | | |
| 23. | Calculat | e your monthly net income. | | | | |
| | 23a. | Copy line 12 (your comibined monthly | income) from Schedule I. | | 23a. | \$3,946.93 |
| | 23b. | Copy your monthly expenses from line | 22 above. | | 23b. - | \$3,938.00 |
| | 23c. | Subtract your monthly expenses from y | our monthly income. | | 23c. | \$8.93 |
| | | The result is your monthly net income. | | | | · |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 24. | Do you e | expect an increase or decrease in your e | expenses within the year after you | file this form? | | |
| | For exan | nple, do you expect to finish paying for yo | ur car loan within the year or do yoເ | u expect your | | |
| | mortgage | e payment to increase or decrease becau | se of a modification to the terms of | your mortgage? | | |
| | X No | | | | | |
| | Yes | . Explain Here: | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |

 Official Form 106J
 Record #
 632668
 Schedule J: Your Expenses
 Page 3 of 3

| Fill in this in | formation to ident | ify your case: | |
|---------------------------|----------------------|-----------------------------------|----------------------|
| Debtor 1 | Roberta | Leedora | Allen |
| | First Name | Middle Name | Last Name |
| Debtor 2 | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of | ILLINOIS_ (State) |
| Case Number (If known) | r | | _ |

Official Form 106 Dec

Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | | |
|--|---|---|
| Did you pay or agree to pay someone who is NOT | an attorney to help you fill out bankruptey | forms? |
| No | , | |
| Yes. Name of Person | | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | | |
| | | |
| Under penalty of perjury, I declare that I have read | d the summary and schedules filed with thi | s declaration and that they are true and |
| correct. | | |
| 🗶 /s/ Roberta Leedora Allen | <u> </u> | |
| Signature of Debtor 1 | Signature of Debtor 2 | |
| Date 12/02/2016 MM / DD / YYYY | Date | v. |
| IVIIVI / טט / YYYY | MM / DD / YYY | ĭ |

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 39 of 60

| Fill in this in | formation to ident | | | 400 00 1 |
|---------------------------|----------------------|-------------------------------------|-----------------|----------|
| Debtor 1 | Roberta | Leedora | Allen | |
| 202.01 | First Name | Middle Name | Last Name | _ |
| Debtor 2 | | | | |
| (Spouse, if filing) | First Name | Middle Name | Last Name | |
| United States | Bankruptcy Court for | the : <u>NORTHERN</u> District of _ | <u>ILLINOIS</u> | |
| Onen Neverber | _ | | (State) | |
| Case Number (If known) | r | | _ | |
| | | | | |

Official Form 107

Statement of Financial Affairs for Individuals Filing for Bankruptcy

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

| number (| (If known). Answer every question. | | | | | | | |
|---------------|--|------------------------------|------------------|----------------------------|--|--|--|--|
| Part 1 | Give Details About Your Marital Status and | l Where You Lived Before | | | | | | |
| 01. Wh | at is your current marital status? | | | | | | | |
| | Married | | | | | | | |
| | Not married | | | | | | | |
| | | | | | | | | |
| 02 Dur | ring the last 3 years, have you lived anywhere | other than where you live no | w? | | | | | |
| | | | | | | | | |
| | Yes. List all of the places you lived in the last 3 | years. Do not include where | you live now. | | | | | |
| | Debtor 1 | Dates Debtor 1 | Debtor 2: | Dates Debtor 2 lived there | | | | |
| | | lived there | Same as Debtor 1 | Same as Debtor 1 | | | | |
| | 1321 N Austin Blvd | FROM 07/2014 | | Same as Debior 1 | | | | |
| | Chicago IL 60651-1025 | To 04/2016 | | | | | | |
| | | _ | | | | | | |
| | | _ | | | | | | |
| | | | Same as Debtor 1 | | | | | |
| | 1752 N Monitor Ave | FROM 09/1996 | Same as Deptor 1 | Same as Debtor 1 | | | | |
| | Chicago IL 60639-4026 | _ To 08/2016 | | | | | | |
| | | _ | | | | | | |
| | | _ | | | | | | |
| | | | | | | | | |
| pro | hin the last 8 years, did you ever live with a s perty states and territories include Arizona, C I Wisconsin.) | | | | | | | |
| _ | No. | | | | | | | |
| | Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H). | | | | | | | |
| | | | | | | | | |
| Part 2 | Explain the Sources of Your Income | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |

Record # 632668

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main

Page 40 of 60 Document Debtor 1 Roberta Leedora Allen Case Number (if known) First Name Middle Name Last Name 04 Did you have any income from employment or from operating a business during this year or the two previous calendar years? Fill in the total amount of income you received from all jobs and all businesses, including part-time activities. If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1. ☐ No. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Check all that apply (before deductions and Check all that apply (before deductions and exclusions) exclusions) Wages, commissions, Wages, commissions, \$23,678 From January 1 of current year until bonuses, tips bonuses, tips the date you filed for bankruptcy: Operating a business Operating a business Wages, commissions, \$25,646 Wages, commissions, For last calendar year: bonuses, tips bonuses, tips (January 1 to December 31, 2015) Operating a business Operating a business Wages, commissions, Wages, commissions, Approx. \$20,000 For the calendar year before that: bonuses, tips bonuses, tips (January 1 to December 31, 2014) Operating a business Operating a business 05 Did you receive any other income during this year or the two previous calendar years? Include income regardless of whether that income is taxable. Examples of other income are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1. List each source and the gross income from each source separately. Do not include income that you listed in line 4. Yes. Fill in the details Debtor 1 Debtor 2 Sources of income **Gross income** Sources of income **Gross income** Describe below. (before deductions and Describe below. (before deductions and exclusions) exclusions) Child Support \$611 monthly From January 1 of current year until the date you filed for bankruptcy: Child Support \$7,300 For last calendar year: (January 1 to December 31, 2015) Child Support For last calendar year: \$7,300 (January 1 to December 31, 2014)

Case 16-38543 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Doc 1

Document Page 41 of 60 Allen Roberta Leedora Case Number (if known) _

Last Name

| Part 3: | List Certain Payments You Ma | de Before You File | ed for Bankruptcy | | | |
|--------------------------|--|--|-----------------------|---|--|--|
| Are e | either Debtor 1's or Debtor 2's d | ebts primarily co | nsumer debts? | | | |
| □ N | No. Neither Debtor 1 nor Debtor "incurred by an individual prir During the 90 days before yo | narily for a person | al, family, or house | ehold purpose." | | s |
| | ☐ No. Go to line 7. | | | | | |
| * | Yes. List below each cre total amount you paid the child support and alimon Subject to adjustment on 4/01/1 | at creditor. Do not y. Also, do not inc | include payments to a | for domestic support obliq in attorney for this bankru | gations, such as uptcy case. | |
| | Yes. Debtor 1 or Debtor 2 or bo During the 90 days before y | | | any creditor a total of \$60 | 0 or more? | |
| | No. Go to line 7. | | | | | |
| | creditor. Do not include palimony. Also, do not inc | • | | • | oort and | |
| | | | Dates of payments | Total amount paid | Amount you still | was this payment for |
| | Honor Finance 909 D | | Monthly | \$ 346 | <u>\$ 8,585</u> | Mortgage Car Credit card Loan repayment Suppliers or vendor Other |
| Inside corpo agent | n 1 year before you filed for bank ers include your relatives; any ge prations of which you are an office t, including one for a business yo as child support and alimony. | neral partners; rel er, director, perso | atives of any gener | ral partners; partnerships er of 20% or more of thei | of which you are a gener r voting securities; and ar | y managing |
| ☐ Ye | es. List all payments to an inside | r. | Detec of | Total amazint | Amount vou of: | December this necessary |
| | | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment |
| | | ruptcy, did you m | ake any payments | or transfer any property c | on account of a debt that t | penefited |
| an ins | n 1 year before you filed for bank sider? de payments on debts guarantee | d or cosigned by a | an insider. | | | |
| an ins | sider? de payments on debts guarantee lo. | | an insider. | | | |
| an ins | sider? de payments on debts guarantee | | Dates of payment | Total amount paid | Amount you still owe | Reason for this payment Include creditor's name |

Debtor 1

First Name

Middle Name

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 42 of 60

| Debtor 1 | Roberta | Leedora | Allen | Case Number (if known) | |
|-------------|--------------------------|--|-------------------------------------|---|--------------------|
| | First Name | Middle Name | Last Name | | |
| Lis | | luding personal injury cas | | ction, or administrative proceeding? collection suits, paternity actions, support or cust | ody |
| | No. | | | | |
| | Yes. Fill in the details | S. | | | |
| | | | Nature of the case | Court or agency | Status of the case |
| | Roberta Allen v. Pa | atricia Barlow; | Injury | Circuit Court of Cook County, Illinois - | Pending |
| | 16L-007276 | | | Law Division | On appeal |
| | | | | | Concluded |
| | | | | | |
| | Roberta Allen v. Ha | alted Financial | Workman's Compensation | Illinois Industrial Commission | Pending |
| | Services; 15WC-01 | | · | | On appeal |
| | | | | | Concluded |
| | | | | | |
| | | | | | |
| | | filed for bankruptcy, was fill in the details below. | any of your property repossessed, | foreclosed, garnished, attached, seized, or levie | d? |
| | No. Go to line 11 | | | | |
| | Yes. Fill in the inform | nation below. | | | |
| | | | | | |
| | | ou filed for bankruptcy, ment because you owed | _ | or financial institution, set off any amounts fro | om your accounts |
| | No. Go to line 11 | | | | |
| | Yes. Fill in the inform | nation below. | | | |
| | | | | session of an assignee for the benefit of credi | tors, a |
| _ | | r, a custodian, or anothe | er official? | | |
| = | No. Yes. | | | | |
| | | | | | |
| Part | <u> </u> | s and Contributions | | | |
| 13 W | ithin 2 years before ye | ou filed for bankruptcy, | did you give any gifts with a total | value of more than \$600 per person? | |
| | No. | | | | |
| | Yes. Fill in the details | | | | |
| 14 W | ithin 2 years before ye | ou filed for bankruptcy, | did you give any gifts or contribut | tions with a total value of more than \$600 to an | y charity? |
| | No. | | | | |
| | Yes. Fill in the details | s for each gift. | | | |
| Part | 6- List Certain Los | ses | | | |
| | - | u filed for bankruptcy or | since you filed for bankruptcy, di | id you lose anything because of theft, fire, othe | r disaster, or |
| ga | ımbling? - | | | | |
| _ | No. | | | | |
| L | Yes. Fill in the details | s for each gift. | | | |
| Part | 74 List Certain Pay | ments or Transfers | | | |
| 16 W | ithin 1 year before vo | u filed for bankruptcv. d | id you or anyone else acting on vo | our behalf pay or transfer any property to anyo | ne you |
| CC | nsulted about seekin | g bankruptcy or prepari | ng a bankruptcy petition? | ies for services required in your bankruptcy. | • |
| Г |] No. | | | | |
| | Yes. Fill in the details | S | | | |
| | | | | | |
| | | | | | |

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 43 of 60

1 Roberta Leedora Allen Page 43 01 60
First Name Middle Name Last Name Case Number (if known)

| | Party Contact Info | Description and value of a | any property transferred | | Date payment or transfer | Amount of payment |
|----|---|---|---|------------------------------|-----------------------------|--------------------|
| | Geraci Law L.L.C. | | | | | \$1,100.00 |
| | 55 E. Monroe Street #3400 | | | | | |
| | Chicago,IL 60603 | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | Party Contact Info | Description and value of a | any property transferred | | Date payment or transfer | Amount of payment |
| | Hananwill Credit Counseling | Credit Counseling Services | | | 2016 | \$25.00 |
| | 115 N. Cross St. | | | | .010 | Ψ25.50 |
| | Robinson, IL 62454 | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| | | | | | | |
| 17 | Within 1 year before you filed for bankruptcy, promised to help you deal with your creditors Do not include any payment or transfer that y | s or to make payments to your cre | • • • | fer any prop | erty to anyone | who |
| | ■ No. | | | | | |
| | Yes. Fill in the details. | | | | | |
| | _ | | | | | |
| | Within 2 years before you filed for bankrupto transferred in the ordinary course of your bu- linclude both outright transfers and transfers Do not include gifts and transfers that you ha | siness or financial affairs? made as security (such as the gra | nting of a security intere | | | |
| | No. | | - | | | |
| | Yes. Fill in the details for each gift. | | | | | |
| | | | | | | |
| 19 | Within 10 years before you filed for bankrupt beneficiary? (These are often called asset-pro- | | o a self-settled trust or s | imilar device | of which you a | are a |
| | No. | | | | | |
| | Yes. Fill in the details for each gift. | | | | | |
| Pa | List Certain Financial Accounts, Instru | ments, Safe Deposit Boxes, and Stor | age Units | | | |
| 20 | Within 1 year before you filed for bankruptcy | , were any financial accounts or in | struments held in your n | ame, or for | your benefit, cl | osed, |
| | sold, moved, or transferred? Include checking, savings, money market, or | | - · · · · · · · · · · · · · · · · · · · | banks, cred | it unions, brok | erage |
| | houses, pension funds, cooperatives, associ | ations, and other imancial instituti | ons. | | | |
| | No. Yes. Fill in the details. | | | | | |
| | _ | Last 4 digits of account number | Type of account or | Date account | t was Last | balance before |
| | | | instrument | closed, sold, or transferred | | ing or transfer |
| | | | | | | |
| 21 | Do you now have, or did you have within 1 ye cash, or other valuables? | ear before you filed for bankruptcy | , any safe deposit box or | other depos | sitory for secur | ities, |
| | No. | | | | | |
| | Yes. Fill in the details. | | | | | |
| | | Who else had access to it? | Describe the conten | nts | Do y | you still e it? |
| | | | | | | |

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 44 of 60

| Jepto | or 1 | Roberta | Leeuora | Alleli | Case Number (If known) | | |
|-------|--|---|-----------------------|--|---|--------------------|--|
| | | First Name | Middle Name | Last Name | | | |
| 22 | Hav | e you stored property | in a storage unit o | r place other than your home within 1 ye | ear before you filed for bankruptcy? | | |
| | | No. | | | | | |
| | = | Yes. Fill in the details. | | | | | |
| | ш | | | Who else has or had access to it? | Describe the contents | Do you still | |
| | | | | | | have it? | |
| P | art 9: | Identify Property Y | ou Hold or Control f | or Someone Else | | | |
| 23 | Dox | vou hold or control on | v property that con | soons also owns? Include any property | you borrowed from, are storing for, or hol | d in truct | |
| | - | someone. | y property that son | leone else owns : include any property | you borrowed from, are storing for, or not | u iii tiust | |
| | _ | No. | | | | | |
| | = | Yes. Fill in the details. | | | | | |
| | ш | | | Where is the property? | Describe the property | Value | |
| | | | | | , , , | | |
| Pa | art 10 | Give Details About | Environmental Info | rmation | | | |
| For | the p | purpose of Part 10, the | following definition | ons apply: | | | |
| | Envi | ronmental law means | anv federal, state, o | or local statute or regulation concerning | pollution, contamination, releases of | | |
| | haza | rdous or toxic substai | nces, wastes, or ma | aterial into the air, land, soil, surface wa the cleanup of these substances, waste | ter, groundwater, or other medium, | | |
| | | means any location, fa used to own, operate, | | | r, whether you now own, operate, or utilize | • | |
| | | | | onmental law defines as a hazardous wa ntaminant, or similar term. | aste, hazardous substance, toxic | | |
| Rep | ort a | ıll notices, releases, aı | nd proceedings tha | t you know about, regardless of when t | hey occurred. | | |
| 24 | Has | any governmental un | it notified you that | you may be liable or potentially liable u | nder or in violation of an environmental la | w? | |
| | | No. | | | | | |
| | $\overline{\Box}$ | Yes. Fill in the details. | | | | | |
| | | | | Governmental unit | Environmental law, if you know it | Date of notice | |
| 25 | | | | | | | |
| 25 | нач | e you notified any gov | ernmental unit of a | any release of hazardous material? | | | |
| | | No. | | | | | |
| | | Yes. Fill in the details. | | | | | |
| | | | | Governmental unit | Environmental law, if you know it | Date of notice | |
| 26 | Hav | e you been a party in a | any judicial or adm | inistrative proceeding under any enviro | nmental law? Include settlements and ord | ers. | |
| | _ | No | | | | | |
| | = | No. Yes. Fill in the details. | | | | | |
| | Ц | res. i ili ili the detalis. | | Court or agency | Nature of the case | Status of the case | |
| | | <u></u> | | - Count of agono, | | | |
| Pa | art 11 | Give Details About | Your Business or Co | onnections to Any Business | | | |
| | | | Cl. 16 . I I I | 4.4 | .64. 6.11 | | |
| 27 | | _ ` | - | | of the following connections to any busine | ess? | |
| | | = | | a trade, profession, or other activity, eit | | | |
| | | <u> </u> | | ny (LLC) or limited liability partnership | (LLP) | | |
| | A partner in a partnership | | | | | | |
| | An officer, director, or managing executive of a corporation | | | | | | |
| | | ∐An owner of at leas | st 5% of the voting | or equity securities of a corporation | | | |
| | | No. None of the above | applies Go to Part | 12. | | | |
| | | | | he details below for each business. | | | |
| | | | , and mill | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 45 of 60

| Debtor 1 | Roberta | Leedora | Allen | Case Number (if known) | |
|------------|---|----------------------------|-----------------------------------|---|------|
| | First Name | Middle Name | Last Name | | |
| | thin 2 years before yo titutions, creditors, o | | you give a financial statement t | o anyone about your business? Include all financial | |
| | No. | | | | |
| | Yes. Fill in the details | 3 . | | | |
| | | Date iss | sued | | |
| Part 12 | Sign Below | | | | |
| ~ | /s/ Poborta Londo | ıra Allan | ~ | | |
| × | Is/ Roberta Leedo Signature of Debtor | | Signature of I | Debtor 2 | |
| | Date _12/02/2016 | | Date | | |
| | MM / DD / Y | YYY | MM / | DD / YYYY | |
| Did y | ou attach additional | pages to Your Statement of | f Financial Affairs for Individua | s Filing for Bankruptcy (Official Form 107)? | |
| 1 | No | | | | |
| □ ' | Yes | | | | |
| Did y | ou pay or agree to p | ay someone who is not an | attorney to help you fill out ban | cruptcy forms? | |
| | No | | | | |
| □ ' | Yes. Name of person | | | Attach the Bankruptcy Petition Preparer's Notice, | 40) |
| | | | | Declaration, and Signature (Official Form 11 | 19). |

Eilad 12/06/16 Entered 12/06/16 17:45:22 Desc Main Fill in this information to identify your case: Roberta Leedora Allen Debtor 1 Middle Name Last Name First Name Debtor 2 Middle Name Last Name (Spouse, if filing) United States Bankruptcy Court for the : <u>NORTHERN DISTRICT OF ILLINOIS EASTERN</u> DIVISION District of ILLINOIS Check if this is an amended filing Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors,

whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.

Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? Surrender the property No Creditor's name: **Honor Finance** Retain the property and redeem it ☐ Yes Retain the property and enter into a 2006 Pontiac G6 with over 100,000 miles Description of Reaffirmation Agreement. property securing debt: Retain the property and [explain]: ____ ☐ Surrender the property □ No Creditor's name: Retain the property and redeem it ☐ Yes Retain the property and enter into a Description of Reaffirmation Agreement. property Retain the property and [explain]: securing debt: □ No Creditor's ☐ Surrender the property name: Retain the property and redeem it ☐ Yes Retain the property and enter into a Description of Reaffirmation Agreement. property Retain the property and [explain]: securing debt: Creditor's Surrender the property ☐ No name: Retain the property and redeem it ☐ Yes Retain the property and enter into a Description of Reaffirmation Agreement. property Retain the property and [explain]: ____ securing debt:

Roberta Case 16-38543

Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Page 47 of 60 Umber (if known)

List Your Unexpired Personal Property Leases

| | ed in Schedule G: Executory Contracts and Unexpired Lea | |
|--|--|---|
| | es. <i>Unexpired leases</i> are leases that are still in effect; the loty ty lease if the trustee does not assume it. 11 U.S.C. § 365(p | • |
| cinded. For may assume an anexpired personal proper | ty reason the trustee does not assume it. 11 0.0.0. g ood(p | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |
| Describe your unexpired personal property leases | | Will the lease be assumed? |
| Lessor's name: | | □ No |
| | | |
| Description of leased | | |
| property: | | |
| Lessor's name: | | □ No |
| Lesson s hame. | | \(\sum \) Yes |
| Description of leased | | ☐ res |
| property: | | |
| | | |
| Lessor's name: | | No |
| Description of leased | | Yes |
| property: | | |
| | | |
| Lessor's name: | | □No |
| Description of learned | | □Yes |
| Description of leased property: | | |
| | | |
| Lessor's name: | | □No |
| | | |
| Description of leased | | |
| property: | | |
| Lessor's name: | | □No |
| | | Yes |
| Description of leased | | 163 |
| property: | | |
| I accorde verses | | □ N- |
| Lessor's name: | | □ No |
| Description of leased | | Yes |
| property: | | |
| | | |
| Part 3: Sign Below | | |
| | : | a debt and ann |
| personal property that is subject to an unexpired lease. | my intention about any property of my estate that secures a | a debt and any |
| , | | |
| 🗶 /s/ Roberta Leedora Allen | x | |
| Signature of Debtor 1 | Signature of Debtor 2 | _ |
| Date Dated: 12/02/2016 | Date | |
| MM / DD / YYYY | MM / DD / YYYY | |

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 48 of 60

B2030 (Form 2030) (12/15)

United States Bankruptcy Court

| | | | NORTHE | ERN DISTRI | CT OF ILLINOIS EASTE | ERN DIVISIO |)N | |
|-----|-----------------|-------------------------------------|---|-------------------------------------|---|-------------------------------------|---|------------------------|
| In | re | | | | | | | |
| Rol | berta Leedo | ra Allen / | Debtor | | | Case No: | | |
| | | | | | | Chapter: | Chapter 7 | |
| | | | DISCLOSU | RE OF COMI | PENSATION OF ATTORN | IEV FOR DEF | RTOR | |
| cor | npensation p | paid to me v | C. § 329(a) and Fed. Ban within one year before the | kr. P. 2016(b), he filing of the | I certify that I am the attorned petition in bankruptcy, or against a lation of or in connection with | ey for the abov greed to be paid | re named debtor(s d to me, for servi | ces |
| | For legal | services, I | have agreed to accept | | \$2,095.00 | | | |
| | Prior to th | ne filing of | this statement I have rec | ceived | \$1,100.00 | | | |
| | Balance I | Due | | | \$995.00 | | | |
| 2. | The source | e of the cor | mpensation paid to me w | vas: | | | | |
| | Deb | otor(s) | Other: (specify | 7 | | | | |
| 3. | The source | e of compe | ensation to be paid to me | | | | | |
| | De | btor(s) | Other: (specify | 7 | | | | |
| 4. | | e not agree y law firm. | | sclosed comper | nsation with any other person | unless they ar | e members and a | ssociates |
| 5. | of my attach | y law firm. hed. for the abov | A copy of the agreeme | ent, together wi | ion with a other person or per th a list of the names of the p er legal service for all aspects | people sharing | in the compensat | |
| | a. Analy | ysis of the o | debtor' s financial situati | ion, and render | ring advice to the debtor in de | etermining who | ether to file a pet | ition in |
| | bankı | ruptcy; | | | | | | |
| | b. Prepa | aration and | filing of any petition, so | chedules, state | ments of affairs and plan whi | ich may be requ | uired; | |
| | c. Repre | esentation of | of the debtor at the meet | ting of creditor | s and confirmation hearing, a | and any adjour | ned hearings ther | reof; |
| | d. Repre | esentation of | of the debtor in adversar | ry proceedings | and other contested bankrup | tcy matters; | | |
| | e. [Othe | er provision | ns as needed] | | | | | |
| 6. | By agreen | nent with th | ne debtor(s), the above-d | disclosed fee de | oes not include the following | service: | | |
| cha | | | • | | es, amendments to schedu contested matters except the | | • | conversions to another |
| | | | | CE | RTIFICATION | | |] |
| | | | | a complete sta | atement of any agreement or | arrangement fo | or | |
| | | payment me for re | to epresentation of the debt | tor(s) in this ba | inkruptcy proceedings | | | |
| | | | 12/02/2016 | | / David Derrick Lugardo | | | |
| | | Date | | | ignature of Attorney | | | |

Page 1 of 1 632668Record #

Geraci Law L.L.C. Name of law firm

Geraci Law L.C. Illinois Indiana Wisconsin 1:45:22 Desc Ma Street, #3400 Chicago, IL 80803 886.929.0707 CLIENT CORNER WWW.INFOTAPES.COM Headquarters: 55 E. Monroe Street, #3400 Chica

Date: 12/2/2016

Consultation Attorney: FCH

Record #: 632-668



Retainer Agreement Chapter 7 - Pre-filing

Services before filing in Court: I retain Geraci Law L.L.C. to prepare to file a Chapter 7 bankruptcy petition in court. I agree to pay, by debit only, a flat fee for services before filing in court of \$ 1,100. $\$\{n/a\}$ per $\{n/a\}$ starting $\{-\}$ and $\$\{n/a\}$ | will obtain from { my own resources} within 60 days of today. Bankruptcy is time-sensitivel may pay more than this amount to pre-pay post-filing services. After filing in court, any balance on the pre-filing fee is discharged. We will start preparing your documents as soon as you sign this contract. Work before signing is no charge. Work or Costs advanced AFTER filing in Court is not included in the pre-filing amount, unless you pay us for it in advance:

After we file your Chapter 7 bankruptcy in Court, we will advance your Court Cost of \$335, and the flat fee for services after case filing is \$ 995 & \$335 = \$ 1,330 total flat fee. We will present you with an agreement to repay the \$335, and pay a fee for our services after filing through Discharge or case closing without discharge. Whether or not you sign a post-filing agreement is entirely voluntary: you are not required to retain Geraci Law for post-bankruptcy services. You may hire some other law firm to finish your bankruptcy and Geraci Law may withdraw from representing you.

The flat fee for pre-filling work pays for: consultation after hiring us, (before retaining us is free) preparation petition and schedules, means test & statement of financial affairs; phone calls, emails, web messages; processing and reviewing documents that we requested from you including faxes, email attachments, web uploads and mail; office appointment to review and sign your petition; filing your case in court. Excluded: appearance in any court or proceeding; taking calls from your creditors or bill collectors. If you decide to pre-pay, or pay for ALL services before and after we file your case in court, all work until case closing is included except: missed section 341 meetings; amendments to schedules; adversary proceedings; any motions including to reopen, avoid judgment liens, for enlargement of time; any contested matter including but not limited to objections to exemptions, motions to dismiss; attending rule 2004 examinations; reviewing documents that we did not specifically request from you; appearance other than bankruptcy court.

Flat fee. With "flat fee", rather than hourly, you know in advance your entire cost unless additional work is required and it usually is cheaper, but you may choose to pay for our services billed hourly at \$75 -\$450/hour, and pay in advance a security retaier, which may cost you more, or less than a flat fee. Advance Payment Retainer. Payments on flat fee or hourly become our property on payment and are deposited into our operating account, not into a client trust account. We will only refund unearned fees.. You may enter into a security retainer agreement with another law firm: we will not because you may lose funds held in our trust account which may be assets in a Chapter 7.

Termination. If you decide not to proceed, delay, fail to respond, fall to pay my attorneys or provide all information & sign my petition according to this schedule, I agree that Geraci Law may discontinue work and charge me for the work done to date at hourly rates shown above. We will only refund fees not earned. Wisconsin: We will submit any unresolved dispute about the fee to binding arbitration within 30 days of receiving written notice of the dispute. You may file a claim with the Wisconsin Lawvers' Fund for Client Protection if the we fail to provide a refund of unearmed advanced fees, if you dispute the amount of the fee and want that dispute to be submitted to binding arbitration, you must provide written notice of the dispute to Geraci Law within 30 days of the mailing of the accounting. If we are unable to resolve the dispute to the satisfaction of you within 30 days after notice of the dispute from the client, we shall submit the dispute to binding arbitration.

Time matters: You agree: to fully cooperate with us and provide all information required; use Client Comer and not to cause excessive work; that more than one attorney or staff will work on your file there is no extra charge for the entire Geraci Law Team, unlike single attorney "law firms". Change in circumstances: This flat fee is based on the facts you told us. If that changes, your fee may change. Exemption laws only protect a limited amount of property. File Chapter 13 if you have property not claimed as exempt, or risk turn over "non-exempt" property to a Trustee. No guarantee of Discharge: Creditors or others may object to a chapter 7 discharge of certain debts or to any discharge, for a variety of reasons. Debts not discharged: student loans; educational debts and tuition; most tax debts; undisclosed debts; maintenance or support; fines; fraud, stealing or intentional injury claims, debts after filing including HOA dues; other debts listed in your green folder as usually not discharged. No discharge if you don't take the 2nd educational course. I will not transfer or acquire any property or incur any credit or debt before filing, and I must make full disclosure of all income, expenses, debts and assets on my bankruptcy petition as of the date I sign it. I AGREE TO READ EVERY PAGE AND EVERY LINE OF MY PETITION BEFORE I SIGN IT AND TO MAKE SURE THAT IT IS COMPLETE AND CORRECT.

(Joint Debtor) Attorney for the Debtor(s), Representing Gerad Law LLC. Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 50 of 60

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Roberta Leedora Allen / Debtor Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE UNDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 12/02/2016 /s/ Roberta Leedora Allen

Roberta Leedora Allen

X Date & Sign

Record # 632668 B 1D (Official Form 1, Exh.D)(12/08) Page 1 of 1

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

UNITED STATES BANKRUPTCY COURT

NOTICE TO CONSUMER DEBTOR(S) UNDER §342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly- addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days <u>before</u> the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total fee \$335

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are

Record # 632668 B 201A (Form 201A) (11/11) Page 1 of 2

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Mair Document Page 52 of 60

Form B 201A, Notice to Consumer Debtor(s)

In re Roberta Leedora Allen / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

| Dated: 12/02/2016 | /s/ Roberta Leedora Allen | | | |
|-------------------|---------------------------|--|--|--|
| | Roberta Leedora Allen | | | |
| | | | | |
| | | | | |

Dated: 12/02/2016 /s/ David Derrick Lugardo

Attorney: David Derrick Lugardo

Record # 632668 Form B 201A, Notice to Consumer Debtor(s) Page 2 of 2

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 53 of 60

| ebtor 1 | Roberta | Leedora Alle | en | Case Number (if known) | |
|-----------------------|--|-------------------------------------|--|--|---|
| | First Name | Middle Name Last | Name | | |
| | | • | | • | |
| art 6 | Answer These Question | s for Reporting Purposes | | | |
| | | 16a Are your debts prim | arily consumer debts? Consum | er debts are defined in 11 | U.S.C. § 101(8) |
| s. W | /hat kind of debts do | as "incurred by an indiv | idual primarily for a personal, family | , or household purpose." | |
| y | ou have? | | | | |
| | | No. Go to line 16b. | | | |
| | | Yes. Go to line 17. | | | |
| | | 16b. Are your debts prim | arily business debts? Business | debts are debts that you i | ncurred to obtain |
| | | money for a business o | r investment or through the operatio | n of the business or inves | stment. |
| | | ☐No. Go to line 16c. | | | |
| | | Yes. Go to line 17. | | | |
| | | | | | |
| | | 16c. State the type of debts | you owe that are not consumer deb | ts or business debts. | |
| | | | | | |
| STATE OF THE PARTY OF | | | | | |
| | re you filing under | No. I am not filing und | ier Chapter 7. Go to line 18. | | |
| C | hapter 7? | _ | | | d.d.d.aad |
| - | o you estimate that after | Yes. I am filing under (| Chapter 7. Do you estimate that afte penses are paid that funds will be av | er any exempt property is vailable to distribute to un: | excluded and secured creditors? |
| | ny exempt property is | aummananve ex | periods are paid that taride this period | | |
| | xcluded and | No. | | | |
| | dministrative expenses | ∏Yes. | | • | • |
| | re paid that funds will be | . J. J. | | | |
| _ | vailable for distribution | | | | |
| t | o unsecured creditors? | | | _ | |
| 18. F | low many creditors do | 1-49 | 1 ,000-5,000 | | 25,001-50,000 |
| - | ou estimate that you | 50-99 | 5,001-10,000 | |] 50,001-100,000 |
| C | owe? | 100-199 | 10,001-25,000 | L | More than 100,000 |
| | | □ 200-999 | | ************************************** | |
| 19. i | low much do you | \$0-\$50,000 | ☐ \$1,000,001-\$10 m | illion [| \$500,000,001-\$1 billion |
| | estimate your assets to | \$50,001-\$100,000 | □ \$10,000,001-\$50 r | million [| 31,000,000,001-\$10 billion |
| ŀ | e worth? | \$100,001-\$500,000 | \$50,000,001-\$100 | | \$10,000,000,001-\$50 billion |
| | | ☐ \$500,001 - \$1 million | \$100,000,001-\$50 | 0 million E | More than \$50 billion |
| 20. l | łow much do you | □ \$0-\$50,000 | □ \$1,000,001-\$10 m | illion [| □ \$500,000,001-\$1 billion |
| | estimate your liabilities | \$50,001-\$100,000 | \$10,000,001-\$50 | million . | □ \$1,000,000,001-\$10 billion |
| 1 | o be? | \$100,001-\$500,000 | 5 50,000,001-\$100 |) million | 3 \$10,000,000,001 - \$50 billion |
| | | ☐ \$500,001-\$1 million | \$100,000,001-\$50 | 10 million | More than \$50 billion |
| Dox | 75 Alexandra Parkers | <i>:</i> | | | |
| Part | A Sign Below | | | | |
| | | I have examined this petition | n, and I declare under penalty of per | rjury that the information p | provided is true and |
| For y | où | correct. | $\mathcal{L}_{\mathcal{A}} = \{ (1, 2, \dots, 2, 1) \mid (1, 2, \dots, 2, 1) \in \mathcal{A} \mid \mathcal{A} \in \mathcal{A} : \mathcal{A} : \mathcal{A} \in \mathcal{A} : \mathcal{A}$ | | and the second second second |
| | | If I have chosen to file unde | r Chapter 7, I am aware that I may p | proceed, if eligible, under | Chapter 7, 11,12, or 13 |
| | | of title 11, United States Co | de. I understand the relief available | under each chapter, and I | I choose to proceed |
| | | under Chapter 7. | And the second second | | the second second |
| | | If no attorney represents me | e and I did not pay or agree to pay s | omeone who is not an att | omey to help me fill out |
| | | this document, I have obtain | ned and read the notice required by | 11 U.S.C. § 342(b). | |
| | ** | Lucarrent relief in accordance | ce with the chapter of title 11, United | States Code specified in | this netition. |
| | | | | | |
| | • | I understand making a false | statement, concealing property, or | obtaining money or prope | erty by fraud in connection |
| | · · · · · · · · · · · · · · · · · · · | | result in fines up to \$250,000, or im | prisonment for up to 20 ye | ears, or both. |
| | | 18 U.S.C.\§§ 152, 1341, 15 | 19, and 35/1. | and the same of the same of | en e |
| | | \bigwedge \bigwedge \bigwedge | MU ₀ | | |
| | V 8 2 | - NAMADA - | All | * | |
| | | Signature of Debtor | | Signature of D | ebtor 2 |
| | | olgnature of Deptor 1 | | - Cignature of D | |
| | | 17 | 102 12016 | | |
| - | * | Executed on | / DD / VVV | Executed on _ | MM / DD / YYYY |
| | the state of the s | MM | / DD / YYYY | | |

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 54 of 60

| btor 1 | Roberta | Leedora | Allen | |
|----------------------------|------------------------|---------------------------------|---------------------|------------------------------------|
| | First Name | Middle Name | Last Name | |
| btor 2 ouse, if filing) | First Name | Middle Name | Last Name | |
| ited States | Bankruptcy Court for t | he: <u>NORTHERN</u> District of | ILLINOIS (State) | |
| se Numbe known) | г | | | Check if this is amended filing |

Declaration About an Individual Debtor's Schedules

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

| Sign Below | |
|--|---|
| Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankru | ptcy forms? |
| No | |
| Yes. Name of Person | Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). |
| | |
| | |
| | h this declaration and that they are true and |
| Under penalty of perjury, I declare that I have read the summary and schedules filed with correct. | n this declaration and that they are but this |
| * Rabell Aler * | |
| Signature of Debtor 1 Signature of Debtor | 2 |
| Date : 12 / 22/2016 Date MM / DD / YYYY | YYYY |

12/15

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 55 of 60

| D = b 4 m d | Roberta | Leedora | Allen | Case Number (if known) | |
|---|---|---|--|--|---|
| Debtor 1 | First Name | Middle Name | Last Name | | ~~~~ <u>~</u> |
| 28 Wi ins | thin 2 years before y stitutions, creditors, | you filed for bankruptcy, did or other parties. | l you give a financial statemen | t to anyone about your business? Include all financial | |
| | No. | | | | 000000000000000000000000000000000000000 |
| | Yes. Fill in the deta | ra.commen 2000 | | | 000000000000000000000000000000000000000 |
| | | Date is | ssued | | |
| Part 1 | 2: Sign Below | | | | _ |
| ans in c | 4 | orrect. I understand that ma nkruptcy case can result in | king a false statement, concer fines up to \$250,000, or impris | ts, and I declare under penalty of perjury that the ling property, or obtaining money or property by fraud onment for up to 20 years, or both. | |
| | Signature of Debto | or 1 | Signature | of Debtor 2 | |
| NATION CONTRACTOR CONTRACTOR CONTRACTOR | Date D, 2 | <u>/2016</u> / YYYY | Date | M / DD / YYYY | |
| Dic | l you attach addition | nal pages to Your Statemen | t of Financial Affairs for Indivi | duals Filing for Bankruptcy (Official Form 107)? | |
| | No] Yes | | | | |
| Die | d you pay or agree t | o pay someone who is not a | an attorney to help you fill out | bankruptcy forms? | |
| | No | | | P. W. Downsonds Medica | |
| | Yes. Name of per | son | | Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). | |
| *************************************** | | | | | and the second second |

Case 16-38543 Doc 1

Filed 12/06/16

Entered 12/06/16 17:45:22 Desc Main

Document Page 56 of 60 Case Number (if known) Leedora Roberta Debtor 1 Last Name First Name List Your Unexpired Personal Property Leases Part 2: For any unexpired personal property lease that you listed in Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the information below. Do not list real estate leases. Unexpired leases are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2). Will the lease be assumed? Describe your unexpired personal property leases ∏ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: ☐ No Lessor's name: Yes Description of leased property: □No Lessor's name: ☐Yes Description of leased property: □No Lessor's name: Yes Description of leased property: □No Lessor's name: Yes Description of leased property: ☐ No Lessor's name: ☐ Yes Description of leased property: Part 3: Sign Balow Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any

personal property that is subject to an unexpired lease.

Date Dated: 0 1 2 12016

Signature of Debtor 2

MM / DD / YYYY

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main

DISCLAIMER Debtors have read and agree:

- 1. Divorce or family support debts to a spouse, ex-spouse, child, guardian ad litem or similar person or entityin connection with a separation agreement, divorce decree or court order are not dischargable. Priority support debts must be paid in full in your Chapter 13 or it cannot be confirmed. DEBTS YOU AGREED TO ASSUME IN MARITAL SETTLEMENT AGREEMENTS are NON-DISCHARGEABLE if your ex-spouse files an adversary complaint, and the Judge rules that (a) you do not have the ability to pay the debt OR (b) discharging such debt would result in a benefit to you that outweighs the detriment to ex-spouse or your child. You agree to get advice in writing from your divorce attorney and send to us with copy of agreement. You must list any ex-spouse or spouse as a creditor. No guarantee any divorce debt is dischargeable. Property you are still on title to, or have a right to in a divorce, may be taken by a Bankruptcy trustee in a Chapter 7 and sold, or may be disposable income in a 13.
- 2. Student loans and educational benefits are not discharged in Chapter 7 or 13 if government insured loan or owed to non-profit school unless you pay us to file a complaint within the bankruptcy to prove repayment would be an "undue hardship", and win. Interest on student loans continue to run while you are in a Chapter 13.
- 3. Cosigners, joint applicants, debts of persons other than debtor, debts incurred during marriage in community property states, or for family support are not discharged and joint, community or co-signers are not protected from collection unless you pay 100% of the debt. Creditors can collect from co-signors and put your bankruptcy on their credit report, and report them negatively to credit bureaus. You may prevent this by making the regular payments to the creditor. Creditors can liquidate collateral of your co-signer and refuse to continue payment in installments. Property you are joint on with other persons can be LIQUIDATED to pay your creditors.
- 4. TAX DEBTS. Most taxes are not discharged in bankruptcy. However, income tax debt (1040 type tax) can be discharged if the following four rules are met:

 (1). The tax return was DUE at least 3 YEARS (plus extensions) before the filing of your bankruptcy case. (2). You FILED your income tax return at least 2 YEARS before your bankruptcy was filed. (You did not file a return if the tax authority or IRS had to file one for you, or if you didn't send the return to the District Director) (3). You did not wilfully intend to evade the tax. (4). The tax must have been ASSESSED over 240 DAYS before the bankruptcy filing. We recommend you meet with the IRS or state department of revenue to make sure all the conditions have been met, before you hire us or file a bankruptcy. Fraudulent taxes and taxes on unfiled returns can be discharged in a Chapter 13 case. Time in an offers in compromise, & time in bankruptcy plus 6 months, will extend the above time periods. Employers' share of FICA & FUTA is dischargeable, but not trust fund taxes like the employee's funds or sales tax.
- 5. Fines, traffic tickets, parking tickets, penalties to governmental unit are not discharged in Chapter 7, may not be discharged in 13 without full payment.
- 6. Non filing spouse: If you file individually, your spouse is not our client. Only your debts are discharged. If you want to protect a non-filing spouse, pay their bills or file a joint case with them. Family expenses (medical bills, rent and necessities may be collected from a non-filing spouse). Wisconsin, community property is liable for community debts. 7. DUI PERSONAL INJURIES, DEBTS YOU DON'T LIST are not discharged.
- 8. DEBTS where creditors successfully object to discharge may survive Creditors, the Trustee, or Court, can try to deny discharge based on many factors,
- a. Income sufficient to pay a percentage of your unsecured debt.
 b. Failure to keep books and records documenting your financial affairs.
 c. Luxury purchases or cash advances within 60 days of filing or without intent or ability to repay.
 d. Debts you made by false pretenses, breach of fiduciary duty, wilful and malicious injuries to others.
 e. Benefit overpayments like aid or unemployment if a determination of fraud has been made before or during bankruptcy.
 f. Failure to appear at meetings, court dates, or co-operate with the Trustee.
- 9. INTEREST ON NON-DISCHARGEABLE DEBTS in a Chapter 13 continues to accrue, and CREDITORS WHO DO NOT FILE CLAIMS in your Chapter 13 plan within 90 days (180 days for governmental units) of the meeting of creditors, do not get paid. Your plan and their claim should provide for interest at contract rate, or you will have to pay the debt outside the Chapter 13 plan. Property taxes must be paid by you directly to avoid sale for delinquent taxes.
- 10. LIQUIDATION OF REAL AND PERSONAL PROPERTY. If you file a Chapter 7, any property that is not listed and claimed exempt on Schedule C pursuant to state or federal law is taken and sold by the trustee to pay creditors. You agree to assume the risk that your property will be taken and sold by the bankruptcy trustee (at or less than what it is worth) if we can't protect it under applicable state law. You get a discharge, but the trustee can take property not listed and exempted on schedules B and C and sell it for whatever price will provide some benefit to creditors.
- 11. CHANGE IN LAWS. Laws & court cases change constantly. We can file your case today if you pay us in full (some attorneys give credit, we don't) pay the filing fee and sign your petition in our main office. ANY DELAY either in hiring us, or after. IS YOUR REPSONSIBILITY. ADVERSE RULINGS Judges that sit in adjoining courtrooms can rule differently on the same facts. We can predict but can't guarantee a judge will or will not rule against you. You accept the risk of a judge ruling against you, as in any lawsuit.
- 12. PAYMENTS TO CREDITORS YOU PREFERRED to pay more than \$600 in front of others, within 1 yr if a relative or insider, or within 90 days if another creditor, so don't pay off debts to keep credit cards or protect others. TRANSFERS OF PROPERTY within 4 years that made you unable to pay your debts at the time can be reversed by a Trustee and the transferee will have to give back the property you transferred.
- 13. SURRENDER OF PROPERTY Bankruptcy gets rid of debts, but real estate, condos and time shares remain in your name until a foreclosure sale or the lender accepts a deed in lieu of foreclosure. Turn condo keys over to condo association or remain liable for assessments after filing, and make sure you keep buildings & land insured and maintained and secured until it is taken back by lender or out of your name. If you let a house go vacant and pipes explode or someone gets killed in there you may be liable.
- 44. RIGHT TO RECEIVE inheritances, tax refunds, injury claims, compensation of any kind, insurance or realty commissions, are property of the bankruptcy estate and you will surrender these to the trustee unless they are claimed exempt on Schedule C, and no objection to your claim of exemption is upheld. Do not deduct extra money from taxes so you are entitled to a refund, change your W-9 if necessary.
- 15. JOINT ACCOUNT HOLDERS holders entire amount in the account could be taken by the trustee under Chapter 7.
- 16. MARRIED COUPLES GOING THROUGH DIVORCE: We have been advised to seek independent counsel for our bankruptcy. We understand that Peter Francis Geraci does not represent us with regard to any divorce matters and does not make any representations regarding what will happen in divorce court. We have decided to file a bankruptcy together dispite the fact that we are getting a divorce and our interests could be adverse. We have agreed to cooperate with each other in this joint bankruptcy.
- 17. AUTO LEASES & INSTALLMENT AGREEMENTS to purchase things, leases and almost all contracts will be void after bankruptcy. They are "executory contracts", and if they are of no benefit to the bankruptcy estate and not assumed within 60 days of filing, they are void. Debtors have been warned of this, and unless there is a novation under state law, or agreement not to use bankrptcy to void the contract, the debtors rights under the contract are extinguished. Debtor agrees to be responsible for obtaining such agreements or losing rights under such contracts. Debtor agrees that his or her attorney will not file motions to assume such contracts.
- 18. Setoffs if you have money in a credit union or creditor account, or other loans that cross-collateralized, any money or property may be taken for both loans. The Undersigned have read the above & assume the risk that a debt is not discharged in bankruptcy, that our non-exempt property will be taken and sold by the bankruptcy trustee if it can't be protected, that the trustee might object if I/we have excess income, or change in State, Federal or Bankruptcy laws before the case is filed in Court AND WE HAVE TO READ, CHECK, & MAKE SURE QUE PETITION IS ACCURATE!!!!

Dated: (2) /2016

Roberta Leedora Allen

X Date & Sign

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 58 of 60

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION

In re

Roberta Leedora Allen / Debtor

Bankruptcy Docket #:

Judge:

VERIFICATION OF CREDITOR MATRIX

The above named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of our knowledge.

I DECLARE LINDER PENALTY OF PERJURY THAT THE FOREGOING IS TRUE AND CORRECT.

Dated: 7 2 /2016

Roberta Leedora Allen

X Date & Sign

^{*} Joint debtors must provide information for both spouses. Penalty for making a false statement or concealing property: Fine up to \$500,000 or up to 5 years imprisonment or both. 18 U.S.C. 152 and 3571.

Case 16-38543 Doc 1 Filed 12/06/16 Entered 12/06/16 17:45:22 Desc Main Document Page 59 of 60

| Cobiging # Spakes Cobigi | Debtor 1 | Roberta | Leedora | Allen | | Case Number (if known) _ | | <u> </u> |
|---|--|--|--|--|----------------------|--|---------------------------------------|---|
| Unemployment compensation Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, file it here. For you. For you reposses. For you. For your spouse. For you. For your spouse. For you. For your spouse. F | | First Name | Middle Name | Last Name | August 1 | | | |
| Content of the present is you contend that the amount received was a benefit under the Social Socially Act, instead, list it here | | 12.43 | | | | | Debtor 2 or | |
| Content of the present is you contend that the amount received was a benefit under the Social Socially Act, instead, list it here | | | | | | 00.00 | \$0.00 | noveres rese |
| under the Social Security Act. Instituct, list it refer | | | | acaived was a henefit | | 30.00 | | *************************************** |
| For your spoulse | Do no unde | ot enter the amount in the Social Security | Act. Instead, list it here: | | | | | rverressedadan |
| 2. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act or payments received as a victim of a wor critine, a critical above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a wor critine, a critine against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c. 10a | Fory | /ou | | | | | | |
| Determine Whether the Mean Yest Applies to Yeu | Fory | our spouse | | | | | | на мостенения выходя |
| Do not include any benefits received under the Social Security Act or payments received as a victim of a war critine, a crime against humanity or international or diometalic terrorizan. If necessary, list other sources on a separate page and put the total on line 10c. 10a. | 9. Pens bene | sion or retirement in efit under the Social | ncome. Do not include any amo Security Act. | unt received that was a | | \$0.00 | \$0.00 | *************************************** |
| 10a. \$0.00 \$ | Dor as a | ot include any bene victim of a war crim- | fits received under the Social So e. a crime against humanity, or | ecurity Act or payments red international or domestic | | | | RODINA ANI MANDRO MINIMANANA |
| 10. 10. Total amounts from separate pages, if any. \$0.00 \$0. | | | | | | \$0.00 | \$ 0.00 | *************************************** |
| 10c. Total amounts from separate pages, if any. 11c. Calculate your total current monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B. 12c. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 | | | | | | \$ 0.00 | \$0.00 | HOMOONOAM |
| Calculate your total current monthly income for the year. Follow these steps: 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 | | - | if any | | | \$0.00 | \$0.00 | w warrawin |
| Determine Whether the Means Test Applies to You 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 | | | | . O. 41 | | | | 60,000,40 |
| 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 | 11. Cale colu | culate your total cui mn. Then add the to | rrent monthly income. Add line tall for Column A to the total for | S 2 through 10 for each Column B. | | \$3,306.46 + | \$0.00 | \$3,306.46 |
| 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 | | | | | | | | |
| 12a. Copy your total current monthly income from line 11 | | | | | | | | |
| Multiply by 12 (the number of months in a year). 12b. The result is your annual income for this part of the form. 12c. The result is your annual income that applies to you. Follow these steps: Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. X ine 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sige Below By signing here, 1 declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Roberta Leedora Allen | 12. Cal | culate your current | monthly income for the year. F | follow these steps: | | Conviling 11 hors | 12a | \$3 306 46 |
| Multiply by 12 (the number of months in a year). 12b. The result is your annual income for this part of the form. 12c. The result is your annual income for this part of the form. 12c. \$39,677.52 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Fill in the median family income for your state and size of household. Fill in the median family income for your state and size of household. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy derk's office. 14. How do the lines compare? 14a. It in 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. In 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. By sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Roberta Leedora Allen Date:: Declaration of months and the form 122A-2. If you checked line 14a, do NOT fill out or file Form 122A-2. | 12a. | | | 11 | | Copy line 11 here | · · · · · · · · · · · · · · · · · · · | |
| 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. X ine 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. ine 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Roberta Leedora Allen Date:: 13 1 2016 If you checked line 14a, do NOT fill out or file Form 122A-2. | | | | | | | 106 | |
| Fill in the state in which you live. Fill in the number of people in your household. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy derk's office. 14. How do the lines compare? 14a. Xine 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Inie 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Roberta Leedora Allen Date:: Data 2016 If you checked line 14a, do NOT fill out or file Form 122A-2. | 12b. | The result is your | annual income for this part of the | ne form. | | | 120. | \$39,077.32 |
| Fill in the number of people in your household. Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. Xine 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Inie 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Roberta Leedora Allen Date:: 1 2 12016 If you checked line 14a, do NOT fill out or file Form 122A-2. | 13. Cal | culate the median f | amily income that applies to ye | ou. Follow these steps: | | | | *************************************** |
| Fill in the median family income for your state and size of household. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. X ine 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Ine 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Roberta Leedora Allen Date:: Data 2 2016 If you checked line 14a, do NOT fill out or file Form 122A-2. | Fill | in the state in which | you live. | IL | | | | |
| Fill in the median family income on your state and us state and us state and using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? 14a. | Fill | in the number of per | ople in your household. | 4 | | | | |
| 14a. X line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Roberta Leedora Allen Date:: 12 12 12016 If you checked line 14a, do NOT fill out or file Form 122A-2. | Т- | find a list of applicat | de median income amounts, on | online using the link speci | fied in the separate | 3 | 13. | \$90,080.00 |
| 14a. X line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Roberta Leedora Allen Date:: 12 12 12016 If you checked line 14a, do NOT fill out or file Form 122A-2. | 14. Ho | w do the lines com | pare? | | | | | |
| 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Part 3: Sign Below By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Roberta Leedora Allen Date:: 12 12 12016 If you checked line 14a, do NOT fill out or file Form 122A-2. | 1 | . X ine 12b is less | | e top of page 1, check box | 1, There is no pre | sumption of abuse. | | |
| By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. Roberta Leedora Allen Date:: 121212016 If you checked line 14a, do NOT fill out or file Form 122A-2. | 14b | ine 12b is mo Go to Part 3 ar | re than line 13. On the top of pand fill out Form 122A-2. | ge 1, check box 2, The pr | esumption of abus | e is determined by Form | 122A-2. | |
| Roberta Leedora Allen Date:: 12 1 2 12016 If you checked line 14a, do NOT fill out or file Form 122A-2. | Part | | | | | | | |
| Roberta Leedora Allen Date:: 12 1 2 12016 If you checked line 14a, do NOT fill out or file Form 122A-2. | | By signing here. | I declare under penalty of perju | ry that the information on t | his statement and | in any attachments is true | and correct. | And the second |
| Date:: 12 1 2 12016 If you checked line 14a, do NOT fill out or file Form 122A-2. | NAMES OF THE PROPERTY OF THE P | Rohe | I Leader | a Alle | | | | |
| If you checked line 14a, do NOT fill out or file Form 122A-2. | | | Roberta Leedora Allen | | - · | | | |
| If you checked line 14a, do NOT fill out or file Form 122A-2. | | | | and the second s | | and the second s | | |
| | ALCO CONTRACTOR OF THE CONTRAC | Date:: <u> </u> | 7/2/2016 | | | | | |
| | · · | If you checked li | ine 14a, do NOT fill out or file Fo | orm 122A-2. | | | | |
| | AS PROPERTY AND ADDRESS AND AD | | | | | | | |

Form B 201A, Notice to Consumer Debtor(s)

In re Roberta Leedora Allen / Debtor

Page 2

found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

Chapter 13: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filling fee, \$550 administrative fee: Total fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The

Dated: (2) 2 /2016

Roberta Leedora Allen

X Date & Sign

Dated: 12+ 2/2016

Attorney: David D. Yugard.

Form B 201A, Notice to Consumer Debtor(s)

Page 2 of 2